

AMPGO Personal Insurance

Disclosure and Declaration form

Customer Details				
Type of customer	Individual/Joint/Body Corporate/ Other			
Client's name	First Name	La	ast Name	
Postal Address				
Email Address			Date of Birth / /	
Mobile Phone	Home Phone		Business Phone	
Questionnaire				
Have you or any members of your family, or any other person or entity to be covered by this insurance: 1. in the past 10 years been bankrupt or in the past 2 years had more than 2 losses or made claims totalling more than \$2,500 Yes No If yes, please provide details: 2. Ever:				
Suffered from flooding or landslip at any address relating to this policy; or Had any insurance declined, cancelled, renewal refused, terms or conditions imposed or claim declined; or Been engaged in any criminal activity or had any criminal convictions, acquittals or have any criminal prosecutions pending? Yes No				
If yes, please provide details:				
(The information sought by this question is subject to the rights set out in the Criminal Records [Clean Slate] Act 2004)				
3. Is there any further information likely to affect this insurance? Yes No				
If yes, please provide details:				
4. Who was your insurance company for the last 12 months, if insured previously?				
Policy number	(these two questions not compulsor	ry)		
Authorisation and Privacy Statement				
1. You authorise Vero Insurance New Zealand Ltd ("Vero") or AMP Services NZ Ltd ("AMP") to give and obtain from other Insurance Companies, Insurance Brokers, the Insurance Claims Register Ltd or any other party any information relating to this or any other insurance held or previously held by you, and any claim(s) made by you, and any information you have provided now or previously for the purpose of payment.				
2. You authorise Vero and AMP to use your personal information to advise of our products and services.				
3. Have you read and understood	3. Have you read and understood the authorisation statements? * Yes No			
4. Your personal information is held by Vero and AMP. In accordance with the Privacy Act 1993, individuals have a right to request access to and correction of their personal information (a fee may be payable) by contacting Vero, 48 Shortland Street, Auckland 1010 or enquiring at AMP, 29 Customs Street West Auckland 1010.				
Your declaration				
1. You declare that subject to any rights you have under the Clean Slate Act, the information given is in every respect correct and complete and all material information has been disclosed to us.				
2. You declare that the information contained in this document shall be the basis of the contract between you and us, and you are willing to accept cover subject to our policy terms, conditions, exclusions and any special terms that we may require.				
Have you read and understood th	e declaration statement? * Yes N	No		
Signature				
SIGNATURE OF CUSTOMER/APPLICANT			Date / /	