

# Bucks Car Hire Limited

## Account Application Form

### FORM OF INDEMNITY - COMPANY OWN INSURANCE

This is to confirm that we wish to use our own insurance to cover vehicles hired by us from you and that this document forms part of the contract of hiring.

Details of our Insurance Policy are as follows :

Policy No :   
  
Cover :

Expiry Date :   
  
Excess :

Name and address of Insurance Co  
  
  
  
  
  
Tel :

Name and address of Broker of Agent  
  
  
  
  
  
Tel :

Vehicle shall mean any vehicle hired to us subject to your standard Rental Agreement and shall include all equipment, accessories, tools and spare tyre.

We agree that any vehicle shall at all times be covered by insurance which will comply with the requirements of the Road Traffic Act 1988 and any statutory amendments or modifications thereto and that all drivers using the vehicle will be approved by us and will hold a current driving licence to drive the vehicle. If an incident, giving rise to a possible claim under the policy, occurs we undertake to complete and submit the relevant form to our insurers.

If there is any material change in the circumstances of our motor policy we will advise you immediately and you will have the right to require us to insure and pay for the insurance of the vehicle under to Standard Terms and Conditions of your then rental Agreement.

We undertake to be liable for and to indemnify you against :

- I. All loss (including loss resulting from your inability to use a vehicle or let the same on hire), injury and damage sustained by you howsoever caused resulting from the destruction, loss or theft of or damage to a vehicle.
- II. All claims and costs for loss injury and damage sustained by any third party howsoever caused resulting from the use of the vehicle.

Despite the terms of this indemnity we acknowledge that we remain liable to comply with the terms of the Rental Agreement relating to a vehicle rented from you.

From :  Name of Company :

Address :   
  
  
  
Telephone No :   
Co Registration No :   
VAT No :

Signed on behalf of (company) :

Signature :  Date :

Print :  Position Held :

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TRADING NAME AND ADDRESS	REGISTERED OFFICE ADDRESS
TELEPHONE NO :	TELEPHONE NO :
FAX :	FAX :

<b>IF A SUBSIDIARY, STATE PARENT COMPANY :</b>
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<b>PLEASE TICK AS APPROPRIATE :</b>			
PLC	LIMITED CO	PARTNERSHIP	OTHER

<b>DIRECTORS, PROPRIETORS OR PARTNERS DETAILS :</b>			
NAME AND ADDRESS :		NAME AND ADDRESS :	
NATURE OF BUSINESS :			
NO OF YEARS TRADING :			
COMPANY REGISTRATION NO :		COMPANY VAT NO :	

AVERAGE MONTHLY CREDIT REQUIRED :		
PROJECTED NO OF VEHICLES PER MONTH :	CARS	VANS

NAME OF BANKERS : ADDRESS :	ACCOUNT NUMBER :  SORT CODE :
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TRADE REFERENCE 1 :	TRADE REFERENCE 2 :
TEL NO :	TEL NO :
FAX NO :	FAX NO :
CONTACT :	CONTACT :

<b>COMPANIES WISHING TO USE THEIR OWN INSURANCE :</b>
We confirm that all Bucks Car Hire vehicles rented by this company will be insured by us and that such insurance will conform with minimum legal requirements. In addition, we will be responsible for full cost of repairs to any Bucks Car Hire vehicle damaged in any way whilst on rent to us. The period of rental for this purpose will extend until a Bucks Car Hire member of staff has checked the vehicle.

**PLEASE NOTE THAT OUR TRADING TERMS ARE 30 DAYS NETT**

<b>CHECK LIST/DOCUMENTS ENCLOSED</b>	YES/NO	NAME :	
INSURANCE POLICY :		SIGNITURE :	
LETTERHEAD :		POSITION IN COMPANY :	
OTHER :		DATE :	

**PLEASE RETURN COMPLETED FORM FAO : Bucks Car Hire Ltd.**  
**TELEPHONE:- 01494 445959    FAX:- 0844 414 2059    E-MAIL - enquiry@buckscarhire.com**

<b>OFFICE USE ONLY :</b>	ACTUAL CREDIT LIMIT : £	B.D.M
BMS REF :		DATE :
SAGE ALLOCATED Y/N		