3 Month FREE

Scooter and Powerchair Insurance



- **✓ £2 Million Public Liability**
- ✓ Accidental Damage
- Theft & Vandalism
- ✓ No Excess

Includes 24/7 National Breakdown Recovery



3 Month Free Insurance

For mobility scooters or powerchairs valued up to £5,000

Please read the Insurance Product Information Document before filling out this application form. To claim your FREE insurance, please complete your details below and return in the envelope provided.

| 71 1 | |
|--|--|
| Your Details | |
| Title First Name(s) | Surname |
| Address | |
| | Postcode |
| Telephone | Mobile |
| | E-mail |
| If you have provided an e-mail address you | will be able to view, download and manage your policy e to go paperless please tick the following box: |
| Authorised Named Person (if | necessary) |
| · · · · · · · · · · · · · · · · · · · | Surname |
| Address | |
| | Postcode |
| Tick here if you want to use this address for | correspondence: |
| Product Information | |
| Make | Model |
| Serial Number | Purchase Price |
| Date of Manufacture | Delivery Date |
| For more informat | ion call us on 01476 512190 |
| or visit | markbatesItd.com |
| I wish to insure my mobility equipment as detailed on this application and agree to accept the insurer's normal form of policy for the type of insurance I have chosen. I confirm that I will look after my mobility equipment with utmost care at all times. I agree that any information provided to Mark Bates Ltd regarding me for the purposes of accepting insurance and handling any claims may, if necessary, be divulged to third parties, provided it will be processed in compliance with the provisions of the General Data Protection Regulation and Privacy Policy which is available on request. | ormal person, I agree, with signified consent, they have en. authority to deal and act upon this insurance policy on t with my behalf, in full, until such a time it is revoked by myself in writing. |
| | From time to time Mark Bates Ltd may wish to contact you with reference to current or new products we have to offer. If you are happy for us to contact you by the following methods please tick the appropriate boxes: Post Phone E-mail |
| Signature | Disclaimer Please note your free cover will not commence until the completed card is received at Mark Bates Ltd, Premier House, Londonthorpe Road, Grantham, NG31 9SN. If |

you have not received your policy documentation through the post within 10 days of forwarding your

registration card, please call 01476 591104.

If you are unable to sign please ensure the application is signed by your authorised named person.

Date