

Section One - Employee Details

Employee Name D.o.B

Home Address

Email Contact number

Intended Named Driver* Relationship to Driver

*A valid driving licence must be supplied for any named drivers on a scheme vehicle. Please refer to the scheme insurance guide for more information.

Section Two - Vehicle Details

Preferred Dealership

1 st Choice	2 nd Choice
Cap ID	Cap ID
Colour	Colour
Model	Model
Trim	Trim

Section Three - Declarations (To be filled in by the Scheme Co-ordinator & Employee)

Employee

- 01** I confirm that I am not currently bankrupt or subject to the terms of an IVA.
- 02** I confirm that the above driver(s) does not have a conviction for any motor offence(s) coded AC, BA, CD40-99, DD, DG, DR, IN, LC30-59, MR, MS50-99, UT or equivalent in the past 5 years or has a prosecution pending in respect of any of these offences.
- 03** I confirm that the above driver(s) does not have a conviction in the past 5 years for any offence or combination of offences which result in a disqualification from driving.
- 04** I confirm that the above driver(s) does not suffer from any medical condition requiring notification to the DVLA and authorisation has not been granted unless such a person has been declared and has been given permission by Allianz to drive.

Signed Signature Date

Once completed, please save down and email to your scheme co-ordinator. If you are unsure on who to send to, please contact kiasupplier@carbenefitsolutions.co.uk

To be completed by a member of HR or your scheme co-ordinator:

- 01** We confirm that the above employee works for the company named in Section One.
- 02** We confirm the driver(s) is/are not a designated person on HM Treasury's Sanction List.
- 03** The employee has successfully completed their probationary period.
- 04** We have seen and retained a copy of all drivers driving licences.
- 05** We confirm that the driving licence(s) is/are valid for the vehicle selected in Section Two.
- 06** The selected monthly repayment on the vehicle is less than 25% of gross monthly salary.

Signed Signature Date