

## Modified vehicle report form

Subject to acceptance by the Company shown above, this form attaches to and forms part of the POLICY of INSURANCE. Please ensure that all questions are answered in full, and returned to Brentacre.

Policyholder'	s Name	Regi	stration	cc
Vehicle Make	e / Model		Y	ear of Manufacture
including A ensure you Continue oi	tails of any modifications lloy Wheels, Engine char list every modification w n another page if necessa se note these cannot be r	nges, Remaps, Paintwo hich makes your vehic ry. Feel free to attach	ork, Decals and Interio tle unique to factory sp	r changes. Please ecifications.
my duty to disclo facts considered this form and dec	N: I declare that to the best of my k use all facts which are material to an material, you should disclose them), claration shall form part of the basis the person shall be deemed to be my a	d will influence the acceptance a , and that failure to do so means of the contract between me and	and assessment of the vehicle, (if that the policy may not operate to	you are in any doubt about protect me. I agree that
Signed .			Date	