

STATEMENT OF FACT

The information shown in this document is a record of the information you have provided to us and is the basis of your insurance contract. The information has been used when calculating the price paid and terms applied. Please advise us immediately if any of the information is incorrect.

Period of Insurance	05/05/2020 to 01/07/2020
Reason for Issue	Transferred to Allianz Assistance
Policy Level	Essentials
Name	Mr Christopher Hunt
Address	147 Holyrood Crescent AL1 2LU
Contact Info	Email: stephenlambillion@planinsurance.co.uk Mobile: 0
Your Date of Birth	12/11/1991

Are you a resident in the UK? Yes

Have you ever been convicted of a criminal offence which you are required to disclose under the Rehabilitation of Offenders Act at the date of this insurance application? No

Please state the number of claims you have made in the last 3 years in relation to any cover you are now requesting: 0

Have you ever had a policy cancelled, voided or renewal refused? No

Bicycle(s) on Cover

No. 1 | Make: Bike 1 | Value: £250 | Type: Hybrid / Flat Bar / Commuter bicycle

ADDITIONAL COVER REQUESTED

Additional DNA+ Kits	0
Value of All Fixed Accessories	£250
Value of Helmet & Clothing	£0



SCHEDULE OF INSURANCE

Policy Number	YJAL365E000736
Reason for Issue	Transferred to Allianz Assistance
Policy Holder	Mr Christopher Hunt
Insured Address	147 Holyrood Crescent AL1 2LU
Effective From	05/05/2020 at 00:00
Expiry Date	01/07/2020 at 12:00

Bicycle(s) on Cover

No. 1 | Make: Bike 1 | Value: £250 | Type: Hybrid / Flat Bar / Commuter bicycle

Additional DNA+ Kits Purchased	0
Value of All Fixed Accessories	£250
Value of Helmet & Clothing	£0
Public Liability	£2,000,000
Family Cover	Included
Personal Accident	Included
Territory	United Kingdom only
UK Legal Expenses	£100,000

