

## 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.

<b>Period of Insurance</b>	05/05/2020 to 05/07/2020
<b>Reason for Issue</b>	Transferred to Allianz Assistance
<b>Policy Level</b>	Essentials
<b>Name</b>	Ms Kathryn Fuller
<b>Address</b>	Flat 411, Howard House Dolphin Square London SW1V 3PF
<b>Contact Info</b>	Email: stephenlambillion@planinsurance.co.uk Mobile: 0
<b>Your Date of Birth</b>	22/11/1946

**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: Pashley Princess | Value: £300 | Type: Dutch / Shopping bicycle

### **ADDITIONAL COVER REQUESTED**

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



## SCHEDULE OF INSURANCE

<b>Policy Number</b>	YJAL365E000757
<b>Reason for Issue</b>	Transferred to Allianz Assistance
<b>Policy Holder</b>	Ms Kathryn Fuller
<b>Insured Address</b>	Flat 411, Howard House Dolphin Square London SW1V 3PF
<b>Effective From</b>	05/05/2020 at 00:00
<b>Expiry Date</b>	05/07/2020 at 12:00

### Bicycle(s) on Cover

No. 1 | Make: Pashley Princess | Value: £300 | Type: Dutch / Shopping bicycle

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

