

Gap in Cover Declaration

Dear Sir/Madam,

This is to confirm that I have not held Motor Insurance in my own name since expiry of my last insurance policy which was on: _____

I further claim that I have not been involved in any accidents or had any claims as a driver or insured, since that time.

My driver's licence has not been endorsed, suspended or otherwise, and no prosecution is pending,

I was not using my motor vehicle since expiry date of my last insurance because:

Name: _____

Policy Number: _____

Signed: _____

Date: _____



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