

Lotus ESPRIT World Insurance Valuation

Policyholder's details

Name: (Mr/Mrs. etc)

Address:

Daytime Tel:

Evening Tel:

Email:

LEW membership No.:

Model (full model):

Estimated Value: £

Purchase Price £:

Date of Purchase:

Body Colour:

Reg No.: Interior Colour:

MOT Date: Year:

Mileage: Right or Left Hand Drive:

Type of use during ownership:



Documentation

Service History:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Gaps in History:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Previous MoTs:	Yes <input type="checkbox"/>	No <input type="checkbox"/>

HPI Checked:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Receipts for work:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
No. of owners:	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Engine & Mechanical

	Con	A+	A	B	C
Engine condition:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transmission Condition:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Suspension Front:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Suspension Rear:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Steering:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brakes:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chassis:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electrical Equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Exterior

	Con	A+	A	B	C
General Appearance:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Condition Paint:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Condition/Alignment Panels:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Engine Compartment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alloy Wheels:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tyres (size/make/condition):					
.....					

Factory Extras

Only included if factory spec

	Yes	No
Glass sunroof:	<input type="checkbox"/>	<input type="checkbox"/>
Air Conditioning:	<input type="checkbox"/>	<input type="checkbox"/>
Leather Interior:	<input type="checkbox"/>	<input type="checkbox"/>
Central Locking (not standard on all models):	<input type="checkbox"/>	<input type="checkbox"/>
Sport Seats:	<input type="checkbox"/>	<input type="checkbox"/>

Interior

General Appearance:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seats:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carpets:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Boot Compartment:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Engine No.:

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Vin Code:

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
S	C	C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

DECLARATION: Please read carefully before signing

I declare that to the best of my knowledge and belief the statement and particulars contained on this form whether written by me or others on my behalf are true and complete and that I have not withheld any material information. I agree to accept the Insurer's policy subject to its terms, exceptions and conditions.

Policyholder's signature: Date:

Have you included: Minimum 3 pictures Copy of MoT & V5 SA,S Envelope Photocopies of other documents Signed & Dated

