



**MOTOR VEHICLES
INSURANCE LTD**

**FORM
7C**

VEHICLE DETAILS ENTRY FORM

Enter the Chassis No.:

Enter the Customer ID (if known):

Customer Name:

PLATE

- ☐ Check if the Plate supplied by MVIL; or
☐ Check if the Plate supplied by RTA/ Prov. Traffic Registry
Indicate the Plate Type:

- | | |
|--|---|
| <input type="checkbox"/> Black & White – RTA | <input type="checkbox"/> Public Motor Vehicle (PMV) |
| <input type="checkbox"/> Customized | <input type="checkbox"/> Taxi |
| <input type="checkbox"/> Diplomatic | <input type="checkbox"/> Trailers |
| <input type="checkbox"/> Government | <input type="checkbox"/> Traders |
| <input type="checkbox"/> Official | <input type="checkbox"/> Hire (H Plate) |
| | <input type="checkbox"/> Motorcycle |

Enter the Plate No.:

VEHICLE YEAR MAKE MODEL

Year:

Make:

Model:

WEIGHT AND LENGTH

Tare Weight:

Gross Weight:

Length:

ENGINE

Engine No.:

Engine Capacity:

Fuel Type:

Cylinders:

MISCELLANEOUS

Seating Capacity:

Axles:

- ☐ Right-Hand Drive ☐ Pneumatic Tyres ☐ Automatic
☐ Left-Hand Drive ☐ Side Car ☐ Manual

COLORS

Primary Color 1:

Primary Color 2:

Secondary Color 1:

Secondary Color 2:

VEHICLE USE

Vehicle Use (Select only 1)

- | | |
|-------------------------------------|---|
| <input type="checkbox"/> Business | <input type="checkbox"/> Medical Practitioner |
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Private |
| <input type="checkbox"/> General | <input type="checkbox"/> Religious |
| <input type="checkbox"/> Ambulance | <input type="checkbox"/> Rental/ Hire |

Body Type:

CONDITION

- ☐ New ☐ Rebuilt/ Reconditioned ☐ Used

FOR OFFICE USE

Vehicle Classification

Premium Classification: _____

Approved By: _____
(Full Name)

Processed By: _____
(Full Name)

Sign: _____ Date: _____

Sign: _____ Date: _____

