



**Name and Address**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Policy Number:** \_\_\_\_\_

**Client Reference:** \_\_\_\_\_

**Request to suspend your policy**

Dear Customer

Please complete the following steps to enable us to proceed with the suspension of your policy.

- 1) Please complete, sign and return the section below and return to our Enniskillen Office.
- 2) Return your original current Certificate of Motor Insurance. If you have lost this document please complete the enclosed Lost Certificate Declaration Form. We are unable to proceed with your request until such time as we are in receipt of the above document.

Should you have any queries in relation your policy, please call our Private Motor Department or email us at [info@quinn-direct.com](mailto:info@quinn-direct.com) Please quote the above Policy Number on all correspondence. Once again thank you for choosing QUINN-direct Insurance, we look forward to being of continued service to you.

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**Terms & Conditions**

- 1) Any refund due as a result of this suspension will be calculated at the end of the suspension and is subject to no claims having arisen, or no claims currently being dealt with.
- 2) Direct Debit instalments will continue to be collected, and refunded at the end of the suspension.
- 3) An administration charge of £17 will be deducted from the refund and we do not charge or refund any amounts less than £20.00.
- 4) The policy must be suspended for a minimum period of 28 days for a refund to apply.
- 5) If the suspension period reaches your policy renewal date, full cover on the vehicle will automatically resume on this date.
- 6) The policy cannot be suspended until I return my current Motor Insurance Certificate or a completed and signed Lost Certificate Declaration Form.

I have read the terms above and agree to them. I instruct QUINN-*direct* Insurance to suspend my policy effective from \_\_\_: \_\_\_ AM/PM on \_\_\_ / \_\_\_ / \_\_\_.

The reason for the suspension is:

\_\_\_\_\_

**Policyholders Signature:** \_\_\_\_\_

**Date:** \_\_\_/\_\_\_/\_\_\_\_\_

**Please return to: 3 Lawnakilla Way, Carran Business Park, Enniskillen, Co. Fermanagh, BT74 4RZ.**

QUINN-Insurance Limited (Under Administration), trading as QUINN-*direct* is authorised by the Central Bank of Ireland and subject to limited regulation by the Financial Services Authority. Details about the extent of our regulation by the Financial Services Authority are available from us on request. Liberty Mutual Direct Insurance Company Limited services the United Kingdom business of QUINN-Insurance Limited (Under Administration).

# LOST CERTIFICATE DECLARATION

Reason for a LCD Request Suspend Insurance Cover

**Instructions to complete this form**

- If your Certificate of Insurance has been lost or destroyed, please complete, sign and date the declaration below.
- Please return this form by post or fax to enable your request to be fulfilled.

**ROAD TRAFFIC ACT  
1988.**

**Statutory Declaration Re: Lost or Destroyed Certificates of Motor Insurance**

**Policyholder's Name:** (I) \_\_\_\_\_

**Insert Full Address:** (of) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**do solemnly and sincerely declare**

that the Certificate of Motor Insurance issued by *Quinn-direct* Insurance in respect of Policy No.

\_\_\_\_\_ for the period from \_\_\_\_\_ to \_\_\_\_\_ have been lost, mislaid or  
destroyed.

Signature: \_\_\_\_\_

Declared at (time and date): \_\_\_\_\_

Witnessed by: \_\_\_\_\_

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