

# Modified Vehicle

## Report Form

### A Your Details

Insured's name

Policy number

Broker's name

### B Modifications

Please answer all the following questions.

Make

Model

Cubic capacity

Year of make

Value

Number of seats

Registration number

#### Engine

a Carburettor: state

Number

Make and type

Choke size

Is it twin choke?

Yes

No

b Cylinder head

1 Has it been machined or polished?

Yes

No

2 Have the inlet or exhaust porting/manifolds been modified?

Yes

No

c Exhaust

1 Are there multiple pipes?

Yes

No

2 Has this increased the brake horse power?

Yes

No

d Has a supercharger/turbocharger been fitted?

Yes

No

e Has an oil cooler been fitted?

Yes

No

f Has fuel injection been fitted?

Yes

No

g What is the brake horse power developed?

h Has compression ratio been changed?

Yes

No

If yes, give details

## B Modifications - continued

i Has there been any engine management change?

Yes

No

If yes, give details

### Suspension

a Have the front or rear springs been altered?

Yes

No

b Have the shock absorbers been uprated?

Yes

No

c Has an anti-roll bar been fitted?

Yes

No

d Have the wheels been uprated?

Yes

No

e Have wheel spacers been fitted?

Yes

No

If yes, to any of the above give details

f Tyres, please give:

Make

Type

Size

Depth of each tyre tread in mm:

N/S Front

N/S Rear

O/S Front

O/S Rear

### Brakes

a Are they power assisted?

Yes

No

b Split or dual circuit?

c Are they disc/drums - discs all round?

d Is ABS fitted as standard?

Yes

No

## B Modifications - continued

---

### Bodywork

a Give details of any modifications or conversions carried out to the vehicle. (If insufficient space, continue on additional information page).

b Has a roll over bar been fitted? Yes  No

c Has bodywork been altered to resemble another model? Yes  No

If yes, give details

### Interior

a Have performance seats been fitted? Yes  No

b Have any seats been removed? Yes  No

c Have the instruments been updated? Yes  No

d Have there been other interior changes? Yes  No

If yes, to a, b, c or d above give full details (if insufficient space continue on additional information page).

## C Declaration

---

I hereby declare that the answers given are true to the best of my knowledge and belief.

Signed

Date (DD/MM/YYYY)

## D Additional Information

---

Please enter additional information and material facts here.

NIG is the trading name of The National Insurance and Guarantee Corporation Limited.  
Registered Office: Crown House, 145 City Road, London EC1V 1LP. Registered in England & Wales number 42133.  
NIG is authorised and regulated by the Financial Services Authority. Our FSA register number is 202263.  
Our permitted business is selling and administering contracts of general insurance.