

To : Hanson Insurance Services Ltd.

Application for retention of No Claim Bonus

Motor Vehicle Policy no.

Traffic Accident on

Involving Vehicles no.

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I/we declare that I am/we are the Insured of the captioned policy willing to undertake any loss/damages sustained to my/our owned vehicle no. \_\_\_\_\_ and any/all third party liability to be incurred towards the captioned accident.

Under the circumstances, I/we shall be obliged if you would consider my/our aforesaid decision and agree to continue to provide further No Claim Bonus to me/us upon renewal of the subject policy.

Please consider my/our application and continue to provide further No Claim Bonus to me/us when the captioned policy is due for renewal.

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Insured of Vehicle no.  
Company chop/Signature

Date : \_\_\_\_\_