

## **Customer Declaration**

I wish to insure my mobility equipment as detailed in the application form and agree to accept the insurer's normal form of policy for the type of insurance I have chosen. I confirm that I will look after my mobility equipment with utmost care at all times. I agree that any information provided to the insurer regarding me for the purpose of accepting my insurance and handling any claims may, if necessary, be divulged to third parties, providing it will be processed by the insurer in compliance with the provisions of the Data Protection Act 1998.