

**Certificate in General Insurance for the Motor Industry
Training Licence Order Form**

When filled in, fax back to **0117 953 9071**. You can also order online
www.motorcompliance.com/orders.

Please complete this order form in **BLOCK CAPITALS**. When faxed back and processed, the relevant IDs and passwords will be emailed to the email address supplied.

Business details

Business Name:

Business Address:

..... Postcode:

Tel No:.....

Contact for the Regulatory Programme

First Name:

Surname:

Position:

E-mail Address:.....

Direct Tel No: (if different from above):.....

Number of Licences required

Advised Sales version Qty:____ £160+VAT per licence

Non-Advised Sales version(s) [Enter Qty below] £ 95+VAT per licence
How many of each Non-Advised version do you require:

Administration: Qty____ **Claims:** Qty____ **Introducer:** Qty ____

Non-Advised: Qty____

Certification

Following the successful completion of this programme you will be sent a City and Guilds certificate. This will be sent to the employers details entered in the Curriculum Vitae

Annual Renewal Fee

An Annual Renewal Fee (of £40+VAT per person for the Advised version and/or £30 +VAT for the Non-Advised version) will be automatically invoiced against all active users on the date of their first anniversary. The fee will cover provision of program upgrades, reassessments, record maintenance and continuing professional development materials.

Important

You're responsible for ensuring that the specification of your computers and operating software is sufficient to utilise the programme (please see motorcompliance.com).

Confirmation

You acknowledge that your use of the Training Materials contributes towards the level of competency required of individuals by the Financial Services Authority for the sale of general insurance products, but that use of the Training Materials in itself does not in any way guarantee that any individual will meet the level of competency required by the Financial Services Authority from time to time.

You confirm that if this application, you accept the attached Terms & Conditions for the use of the Programme.

Signed Date.....

Name (CAPITALS) Position.....