

# BICYCLE NSW MEMBERS CYCLECOVER HOME & CONTENTS INSURANCE

**If you would like a quote please complete this form and:  
Fax to 03 9889 9144 Email to cyclecover@cib.biz Or Phone 1300 733 055**

**Policy Type:**    Essentials Policy     Gold Policy     Please Quote Both

**Name:**     **Membership Number:**

**Address:**     **DOB:**

**Are you retired?** Yes/No     **Phone:**     **Email:**

## DETAILS OF YOUR HOME

**Age of Building:**     **Type:**  Home / Unit / Flat / Townhouse / Security Unit

**Construction:**  Brick/Timber/Fibro/Mixed    **Roof:**  Cement Tiles/Tin/Slate/Other

**Security:**  Deadlocks/ Keyed Window Locks/Bars/Local Alarm/Monitored Alarm

## DETAILS OF YOUR COVER – Yes we can cover contents only

**Building Sum Insured:**     **Contents Sum Insured\***

\* Contents amount should include any specified items you may have on your current policy

**Special Valuables cover:**  If you have any special valuables cover please list here

DETAILS OF YOUR BICYCLES – Please list all bicycles. This will help us determine the best policy.

Bicycle Description	Value	Theft/Damage Cover?	Racing Cover?
1. <input type="text"/>	\$ <input type="text"/>	Yes/No <input type="text"/>	Yes/No <input type="text"/>
2. <input type="text"/>	\$ <input type="text"/>	Yes/No <input type="text"/>	Yes/No <input type="text"/>
3. <input type="text"/>	\$ <input type="text"/>	Yes/No <input type="text"/>	Yes/No <input type="text"/>
4. <input type="text"/>	\$ <input type="text"/>	Yes/No <input type="text"/>	Yes/No <input type="text"/>
5. <input type="text"/>	\$ <input type="text"/>	Yes/No <input type="text"/>	Yes/No <input type="text"/>
6. <input type="text"/>	\$ <input type="text"/>	Yes/No <input type="text"/>	Yes/No <input type="text"/>

## YOUR INSURANCE HISTORY

**Details of any claims past 5 years:**

**Current Insurance Co (if applicable)**     **Expiry:**