

Pro forma to send to your insurance company.

To: Insurance Company

Name:

Address:

Policy Number:

Vehicle Reg Number:

To whom it may concern,

I ....., being the policyholder/driver named under this policy, intend to undertake voluntary work and from time to time I will use my vehicle to:

- travel to and from my volunteer placement Yes / No
  - carry passengers Yes / No
  - carry out other duties as requested Yes / No
- (delete as appropriate)

I should be grateful if you would confirm by email, [dementiactive@gmail.com](mailto:dementiactive@gmail.com) or letter to Dementia Active, 4 Eady Rd, Upper Heyford, Bicester OX25 5TU. that my existing policy covers me for such volunteer driving.

Please also confirm that my insurance policy contains a clause indemnifying Dementia Active, for whom I am a volunteer, against third party claims arising out of the use of my vehicle for such voluntary work.

To cover the running costs of my vehicle in accordance with Section 1(4) of the 1981 Public Passenger Vehicles Act, which exempts me from both Public Service Vehicle and Hackney Carriage licensing laws, I will receive travel expenses for these journeys.

Yours faithfully

.....(signature)

Date:

My address:

My postcode: