

(ORGANISATION NAME AND LOGO)

VOLUNTEER DRIVER'S NAME _____

VOLUNTEER DRIVER'S ADDRESS _____

TO (Insurance Company) _____

RE POLICY NUMBER _____

Dear Sir/Madam

I intend to undertake voluntary work and, from time to time, I will use my vehicle to carry passengers or to carry out other duties, as requested. I will receive a mileage allowance for these journeys to cover the running costs of my vehicle in accordance with Section 1(4) of the Public Passengers Vehicles Act 1981, which exempts me from both Passenger Service Vehicle and Hackney Carriage/Private Hire Car licensing laws.

I should be grateful if you would confirm that my existing policy covers me for such volunteer driving – please use the ‘tear off’ slip below. Please also confirm that my insurance policy contains a clause indemnifying the agencies with which I am a volunteer against third party claims arising out of the use of my vehicle for such voluntary work.

Yours faithfully,

Volunteer Driver and Policy Holder

FROM (Insurance Company) _____

RE (Policy Number) _____

POLICY HOLDER/VOLUNTEER DRIVER _____

This is to confirm that your insurance policy covers voluntary driving (for which a mileage allowance may be received). This also confirms that the above policy contains a clause indemnifying the agencies with which you are a volunteer against third party claims arising from the use of the vehicle on such voluntary work.



OFFICIAL STAMP

ISSUED BY _____ DATE _____