Name of Policy Holder			
	Address of Policy Holde	er	
		Post Code _	
То			(Insurance Company)
Do: Doliou Numbor			
Re: Policy Number	<u> </u>		
Policyholder			

Dear Sirs

VOLUNTEER DRIVING

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 Passenger Vehicles Act 1981 which exempts me from both Passenger Service Vehicle and Hackney Carriage/Private Hire Car licensing laws.

I would be grateful if you would confirm that my existing policy covers me for such volunteer driving by returning the tear-off slip below. Please also confirm that my policy contains a clause indemnifying the agency for which I am a volunteer against third party claims arising out of the use of my vehicle for voluntary work.

Yours sincerely

(Policyholder)

Insurance Company to complete this Section and **Return to Policyholder**

Insurance Company Name ______

Re Policyholder _____ Policy Number _____

This is to confirm that your policy covers VOLUNTARY DRIVING (for which mileage allowance may be received) and the 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.

Signed

Company stamp

Dated