

Locum / Absence Insurance Enquiry Form

Step 1 – To obtain a Locum quotation please complete the sections below.

Step 2 – For us to contact you nearer to your renewal date please complete Renewal Date.

Step 3 – Return the completed form to MIC, Park House, 45 The Park, Yeovil, Somerset, BA20 1DF or by fax to 01935 422120 or by email to enquiries@m-i-c.co.uk

Practice Details

Practice Name:			
Contact Name:			
Address:			
Tel. No:		Email:	

Locum Insurance Requirements

Name	Gender M/F	Date of Birth	Weekly Benefit	Deferred Period
		/ /	£	weeks
		/ /	£	weeks
		/ /	£	weeks
		/ /	£	weeks
		/ /	£	weeks
		/ /	£	weeks
		/ /	£	weeks
		/ /	£	Weeks
Current / Renewal Premium	£		Current Provider

Locum Renewal Date/...../..... (Insert date). Please contact me closer to the Renewal Date.

I would also like a quotation for the following (please complete for each product):

- | | |
|--|---|
| <input type="checkbox"/> Surgery Insurance | Renewal Date/...../..... |
| <input type="checkbox"/> Staff Absence Insurance | Renewal Date/...../..... |
| <input type="checkbox"/> Home Insurance | Renewal Date/...../..... |
| <input type="checkbox"/> Landlords Insurance | Renewal Date/...../..... |
| <input type="checkbox"/> Income Protection (PHI) | <input type="checkbox"/> Life &/or Critical Illness |
| <input type="checkbox"/> Partnership Protection | <input type="checkbox"/> Legal Expenses |

FOR FURTHER INFORMATION CALL OUR ADVICE LINE ON FREEPHONE 0800 163870

Medical Insurance Consultants • Park House • 45 The Park • Yeovil • Somerset • BA20 1DF

T: 01935 424 085 • F: 01935 422 120 • E: enquiries@m-i-c.co.uk • W: www.m-i-c.co.uk

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