

COVID – 19 CHANGE OF VEHICLE USE FORM

By completing this form, the named insured or the Broker representative on behalf of the named insured, agrees that the vehicle(s) are:

- Only being used for essential purposes such as getting groceries or picking up medication.
- Not being used for business or to commute to work or school.
- Not being used for commercial purposes including delivery.

BROKERAGE NAME
CLIENT FIRST NAME
AVIVA POLICY NUMBER (eg A12345678PLA)
VEHICLE INFORMATION
All vehicles on the policy are being used for pleasure
OR, if not all vehicles on the policy are being used for pleasure, please list those that are:
VEHICLE YEAR VEHICLE MAKE VEHICLE MODEL
VEHICLE YEAR VEHICLE MAKE VEHICLE MODEL
I attest that all the above are true statements and I am using my vehicles for pleasure use only
 Once the form is submitted a policy change document and details of your savings will be sent to you. If your driving habits change before 90 days, please notify your Brokerage. If not, your
policy information will revert back to the original state after 90 days.