Motor Theft Claim Form

Insured					
Name					
Physical Address					
Contact Number/s					
I.D No. / CK No.			Email Adress		
Vehicle					
Registered Owner					
Make & Model			Year		
Exterior Colour			Interior Colour		
Registration Number		Purchase Price		Purchase Date	
Anti-Theft Devices (if applicable)					
#1 Make		#1 Fitted By		#1 Date	
#2 Make		#2 Fitted By		#2 Date	
Any Other Identifying Marks on Vehicle					
Window Markings					
Scratches / Dents/ Defects					
Any other features that will assist in identification					
Vehicle Extras					
Non Standard Vehicle Extras (Attach Proof)					
Specified Vehicle Extras (Attach Proof)					
Drivers Details					
Full Name			ID Number		
Address					
Occupation			Contact Number		

Driver's License Details					
Code		Place of Issue		Date	
State the purpose for which the vehicle was being used					
Was the driver driving with your consent?			Is the driver in your employ?		
Yes			Yes		
No			No		
Is the driver owner of another vehicle?			If yes, provide name of insurer & Policy No.		
Yes			Insurer		
No			Policy No.		

Theft/ Hi-Jack Details					
Date		Time		Place	
Road Names of Closest Intersection					
When was the theft discovered?					
Circumstances					

Police Details					
Name of Officer		Police Station		Police Reference No.	
Was the driver tested for alcohol or drugs?					

Required Documents

We cannot proceed without the following documents.

PLEASE ATTACH:

1. Copy of first page of registered owner's ID document
2. Copy of the Vehicle Registration papers
3. Vehicle Keys (and spares)
4. The last service invoice
5. Any additional paperwork will be requested by the appointed assessor.

Declaration

- I/we hereby declare the foregoing particulars to be true in every respect and hereby authorise the insurance company to obtain the police report on my behalf.
- I /we declare that we will comply with the policy terms and conditions as per the policy contract and policy schedule.

Signature of Driver			Date		
Signature of Insured		Date		Capacity	