



Client Details

Policy number			
Name			
Contact Number			
Identification number /Reg No.			
Vehicle Details	Make		Model
	Registration		Year
VIN number			Mileage

Finance Details

Is the vehicle financed?	Yes		No
Finance company name			
Account number			
Outstanding balance			

Theft Details

Date of theft	
Time of theft	
Place of theft	
Circumstance of Loss	
Police station reported	
Reference number	
Date reported	
Reported by	

Was the vehicle locked? If not state, why.	
Details of stolen accessories (Please attach invoices). Are these separately insured?	
Anti-theft device/ Vehicle Recovery Device details.	Make:
	Fitted by:
	<i>If possible please attach proof of device to this form.</i>
Details of Window markings	No.:
	Applied by:
Details of scratches, dents, defects.	
Details of other features which would assist identification.	

Declarations

I/We hereby declare the foregoing particulars to be true in every respect. In terms of the policy, I/We agree to render all assistance requested by the Insurer and the identification and physical recovery of such vehicle to be located.	
Signature of insured	
Date	