

Security & General Insurance Company Ltd

Motor Vehicle Fire/Theft Report

Personal Data

Policyholder's Name	
Address – Street number and name	
District and PO Box	
City and Country	
Telephone Contacts	
	Home
	Work
	Cellular
Date of Birth	
Employer's name	
Employer's address	
Driver's License #	
National Insurance #	
Total annual income (incl. Spouse)	

Details of Insurance

Policy number	
Type of Cover	
Renewal Date	
Is the loss covered by any other insurance?	

Vehicle Information

Make		Model	
Year		VIN	
Color		Lic. #	
Mileage		Value	
Details of any recent repairs			
Number of keys presented			
Names of other key holders			
Was the vehicle alarmed			
Describe any identifying marks			

Vehicle Purchase

Purchased from	
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Condition (New, Used, Salvage)
Date of Purchase
Amount paid

Vehicle Loan Details

Bank
Branch
Period of loan
Period remaining
Monthly repayment amount
Remaining balance
Does any other finance institution
have an interest in this vehicle?
Was the vehicle every
repossessed?
If so, provide details

I hereby authorize Security & General Insurance Company Limited to obtain copies of my bank records and any information concerning myself with regard to my claim and the investigation of the circumstances surrounding the theft of my vehicle.

Locus of the loss

Date
Time
Location
Purpose for being there?
Police Officer's name and rank
Police Station
Date and time reported

Circumstances of the loss

Where was the vehicle last seen?
State the purpose for which the vehicle was
being used?
When was the loss discovered?
Was the vehicle in a garage?
Was the vehicle locked and the key removed
Name of the last person to use the vehicle
Address
Driver's License #
National Insurance #
Is this person in your employ

Do you have any suspicions or suspects?
 How did you get home from the location of the theft?
 Have you had any other theft of this or any other vehicle?

Statement:

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I/we understand and agree to the payment of the Compulsory Claims Excess (where applicable) in the amount of \$250-\$750 as specified in Section One of the Policy

I hereby certify that the above statement and the information given are true to the best of my knowledge and belief. I further declare that to my knowledge no person other than myself has any interest in the lost or damaged property by bill of sale or as owner, mortgagee, and trustee or otherwise, except as stated.

Accordingly I claim the sum of	
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Signature	*	Date	*
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