

4. THEFT FROM A VEHICLE (complete if applicable)

9. Please confirm the make, model and year of manufacture of the vehicle

Make:

Model:

Year:

11. Was the pedal cycle mounted on a caddy?

Car Trailer

Make of caddy:

10. How was access gained into the vehicle?

5. POLICE INFORMATION

12. Date & time the incident was reported to the police

Time: _____ am/pm Date:

13. Police station where incident was reported?

14. Police reference number given by the police:

15. Did the police attend the scene of the crime?

Yes No

16. If the police were not advised immediately after the incident was discovered, please confirm the reason for the delay:

6. ITEM DETAILS

Item Number	Make	Model	Colour	Serial Number	Date of purchase	Place of purchase	Original purchase price	Estimated replacement cost
1.								
2.								
3.								
4.								
5.								

Any other items:

Description of any damage:

7. DECLARATION

I/We declare that the information provided in this claim form is true to the best of my belief and knowledge. I/we have not withheld any information within my/our knowledge connected with this claim. I/we accept that if I/we exaggerate any part of this claim, or make any false declaration or statement, I/we shall not be entitled to receive any benefit under this policy in respect of this claim. Furthermore, I/we accept that any such action on my/our part may render me/us liable to prosecution. I/We further agree to provide any further information or documentation as may be reasonable required. I/we understand that you may seek information from other insurers to check answers that I/we have provided.

Signed by policy holder(s): _____

Date: