

CLAIM FORM

MOTOR VEHICLE INSURANCE



POLICY INFORMATION

Policy Number _____ Expiry Date _____
Insured Name _____
Address _____
Vehicle Details Year: _____ Make: _____ Model: _____
Registration Number _____ Are you registered for GST YES NO

INCIDENT DETAILS

Date of Accident _____ Time _____
Address where accident occurred _____
Description of Accident _____

Was the vehicle towed? YES NO Location of vehicle now _____
If yes, advise where to. _____
Where is your vehicle damaged _____
Have you obtained a quote for repairs? YES NO
If yes, Name & Address of Repairer _____
List of damaged personal effects? _____
Does your vehicle have any pre-existing damage YES NO
Did the Police attend YES NO If Yes, Name and Station of Officer _____

DRIVER DETAILS

Name _____ Phone Number _____
Address _____
Date of Birth _____ Licence Number, Class & Expiry Date _____
Had you consumed any drugs or alcohol 12 hours prior to the accident YES NO

THIRD PARTY DETAILS

Drivers Name _____ Phone Number _____
Address _____
Vehicle Details Year: _____ Make: _____ Model: _____ Reg No: _____
Insurer Name: _____ Policy Number: _____
Damage to Vehicle: _____

WITNESSES

Name _____ Phone Number _____
Address _____

SETTLEMENT DETAILS

How do you want to be reimbursed? CHEQUE EFT

Address to send cheque _____

EFT Details BSB _____ A/C No _____ Bank _____
A/C Name _____

DECLARATION & AUTHORISATION

I confirm I have checked all the information contained in this document, some of which may not be in my own handwriting, and hereby verify the truth and accuracy of the information contained in this document.

Signature of Insured _____ Date _____

Forward completed claim form to Ovens Valley Insurance Brokers

Email info@ovib.com.au
Post PO Box 383, Myrtleford VIC 3737
Deliver 47 Clyde St, Myrtleford VIC 3737
Phone 03 5752 1151

OFFICE USE ONLY

In the event of a total loss, have you obtained;

- Copy of vehicle Registration Papers
- Vehicle finance company payout figure on letterhead (if currently financed)
- Is a replacement vehicle available?