

MOTOR THEFT CLAIM FORM

INSURED NAME _____

POLICY NUMBER _____

BROKER _____

AIUA claims are handled in compliance with the requirements of The ABI Claims Code. Further information can be obtained by visiting the ABI website <http://www.abi.org.uk>

IMPORTANT NOTICE

In the event of this claim being successful and payment authorised in your favour, the amount being claimed can be paid directly in to your bank account using Bank Automated Clearing Services (**BACS**).

In order to do this the company will need you bank account details so please complete the form below (Capital Letters Please) :-

Name of Bank	
Branch	
Sort Code	
Bank Account Number	
Account Name	

Towergate AIUA

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Towergate AIUA is a trading name of Towergate Underwriting Group Limited

Registered in England No. 4043759 Registered Address: Towergate House, 2 County Gate, Staceys Street, Maidstone, Kent ME14 1ST

Authorised and regulated by the Financial Services Authority

THEFT

Insured _____

Address _____

Postcode _____

Tel. No. _____ Mobile _____

Are you VAT registered? YES / NO

Can you recover VAT for this claim? YES / NO

Vehicle Make _____

Model _____

Registration No. _____

Year of manufacture _____

Value _____

Name of any finance/ leasing Co. _____
_____Name of person in charge at time of theft _____
_____Address _____

Post Code _____ Tel. No. _____

Date of Birth _____

Date UK driving test passed _____

Categories entitled to drive _____

Details of accidents in the last 3 years _____

Details of motoring convictions _____

Was the driver an employee of the insured? YES / NO

How often does this person use the vehicle _____

Date of theft _____ Time _____

Exact Location where the theft occurred _____

Was the vehicle in a locked building? YES / NO

When and by whom was the vehicle last seen ? _____

When and by whom was the theft discovered _____

Was the vehicle locked? YES / NO

Was the vehicle fitted with an alarm / immobiliser? YES / NO

If yes, was this activated at the time ? YES ? NO

If an ATV, how was it secured? _____

When were the police notified? _____

Please give details of the police station, police officer and

Crime reference number _____

Please complete this section if the claim is for audio equipment only.

Was this fitted as standard to the vehicle YES / NO

Make _____ Model _____ Serial No _____

Insurers pass information to the Claims and Underwriting Exchange Register, run by Insurance Database Services Ltd (IDS Ltd) and the Motor Insurance Anti-Fraud and Theft Register, run by the Association of British Insurers (ABI). The aim is to help us to check information provided and also to prevent fraudulent claims. Under the conditions of your policy, you must tell us about any incident (such as an accident or theft) which may or may not give rise to a claim. We will pass information relating to this incident to the registers.

I/We understand that in handling this claim, Towergate AIUA (a trading name of Towergate Underwriting Group Limited) will act on behalf of the insurer(s) and that I/we confirm our informed consent to the claim being handled on this basis.

I/We declare that these details are true in every respect.

I/We understand that you may ask for information from other insurers to check the answers I/We have provided.

Signed _____ Date _____