

MOTOR THEFT CLAIM FORM

Fax to your Broker



INTELLIGENT INNOVATIVE INSURANCE

Insured	Claim number			
	Policy number			
Broker	Broker name		Claim number	
	Policy number			
Insured	Company name / surname and initials			
	Company registration number			
	Identity number			
	VAT number			
	Occupation or business			
	Physical address			
	Postal address			
	Telephone numbers	Business		Cell
	Home			
Vehicle	Make			
	Model			
	Year			
	Registration number			
	Kilometers completed			
	Vehicle identification No.(Vin)			
	Chassis number			
	Engine number			
	Exterior colour			
	Interior colour			
Financecompany	Name			
	Branch			
	Account number			
	Type of agreement			
	Outstanding amount			

