**MOTOR VEHICLE CLAIM FORM**

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| Date: | Date Lodged: |
| Contact Name: | Claim No: |
| Phone: | Claim Manager: |
| Mobile: | Phone No: |
| Email: | Email: |
|  | Assessor Details: |

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| **Insured:** |
| Underwriter: | Excess:  |
| Policy Type: | Policy No: |
| Registered for GST: Yes / No | ITC Entitlement: % |
| ABN: |  |

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| **Vehicle:** |
| Rego No: | Vehicle Finance: |
| Drivers Name: | Drivers Contact No: |
| Drivers D.O.B.: | Relationship to Insd: |
| Drivers Lic. No: | Class: |
| Years held Lic: | Expiry Date: |
|  In the past 5 years has the **policy holder or driver** (Allianz Policies Only): |
| * Had a driver’s licence cancelled, suspended, been disqualified, from

driving or committed any driving related alcohol or drug offence? Yes / No |
| * Had an insurance policy declined, cancelled or conditions imposed

on an insurance policy? Yes / No |
| * Committed any criminal offences? Yes / No
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| If YES please provide details: |
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| **Date of the Incident:** / / | Time: am|pm |
| Incident Location: |
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|  | State: Postcode: |
| How did the Accident happen: |
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|  | Speed travelling at impact: km/h |
| Were the police called: YES | NO | 24hrs prior to accident did the driver consume: |
| Incident No: | Alcohol: YES | NO |
| Police Station: | Drugs: YES | NO |
| Officers Name:  | Was the driver breathalysed: YES | NO |
| Road Conditions: SEALED |UNSEALED | OTHER : |
| Weather Conditions: DRY | RAINING| FOGGY|OTHER: |
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| **Third Party Details:** |
| Drivers Name: | Licence Number: |
| Phone number: | Address: |
| Year, Make and Model of Vehicle: |
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| Registration No: | Colour of Vehicle: |
| Insurance Company: |  |
| Where is the damage to the third party vehicle: |
| Other: |
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| **Insured Vehicle details for repairs** |
| Is there damage to the insured vehicle: Yes / No | Is the vehicle still driveable: Yes / No |
| Tow Truck Required: Yes / No PD / UNPD | Tow Truck Company Details: |
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| Where is the damage to the vehicle:  |
| FRONT | REAR |DRIVER’S SIDE | PASSENGER SIDE | ROOF | UNDERCARRIAGE | |
| Other details: |
|  |
| Where is the Vehicle now: |
| Have quote and images been obtained: Yes / No Amount: $ |
| If no, when will you be getting quote:  |
| Preferred repairer’s details: |
|  |

**Diagram | Other details:**