

Was the vehicle locked?

YES / NO

MAKE AND CODE OF ANTI-THEFT DEVICE:

(**NB** PLEASE ATTACH PROOF OF DEVICE)

Immobiliser:		Fitted by:		Date Installed:	
Gearlock:		Fitted by:		Date Installed:	
Tracker:		Fitted by:		Date Installed:	

Details of stolen accessories (please attach invoices)

DETAILS OF WINDOW MARKINGS:

Number:	
Applied by whom:	

Details of scratches, dents, defects

Details of other features which would assist identification

PLEASE ATTACH THE VEHICLE KEYS, A COPY OF THE REGISTRATION CERTIFICATE, AND THE LAST SERVICE INVOICE

DECLARATION: I / We hereby declare the foregoing particulars to be true in every respect.

Date

Signature of Insured
