



1. Insurance Company:

2. Policy Number:

Expiry Date:

3. Insured (surname, company, partnership):

Given Name(s) of Insured:

Contact Person (for company or partnership):

4. Address:

Suburb:

Postcode:

5. Private Telephone No:

Business Telephone No:

Email Address:

6. Are you registered for GST purposes?

No Yes What is your ABN?

7. **Vehicle Details:**

Make/Model:

Registration Details:

8. Who is the registered owner of the Vehicle?

9. Is the trailer under finance?

Yes No Lender's name:

10. Did the driver have permission to be driving the vehicle? Yes No

11. Driver's Licence Details

Licence Number:

Expiry Date:

Class:

Years / Months Licence Held:

Accident Details:

12. When did the accident happen?

Day:	Date:	Time:
<input type="text"/>	<input type="text"/>	<input type="text"/> AM <input type="text"/> PM

13. Where did the accident happen?

14. How did the accident happen?

*You must report any loss, theft or vandalism of your motor vehicle to the police.
The insurance company may need to apply to the police for a copy of this report.

Name of police station where you report it:

Name of police officer:

Police Report No:

Date Reported:

15. Repairer Details:

Cost of Repairs:

16. Bank Details

Name:

BSB:

Account:

I declare that to the best of my knowledge and belief the information in this form is true and correct and I have not withheld any relevant information.

Signature

Date

[Click here to learn how to digitally sign this document](#)