

Office Use Only:

Reference No.		Claim No.		Date of Issue	
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PERSONAL INFORMATION:

Full Name			
Home Address			
Delivery Address			
Post Code			
Date of Birth		Occupation	Recovery Driver
Contact No. (Home)			
Email Address:			

CLAIM DETAILS: (This information will be checked with your service provider and other relating authorities. If any information is disputed by them, the claim will be invalidated).

Make & Model		Mobile No	
Colour *		Storage Capacity (if applicable)	
IMEI / Serial No.			
Date of Purchase			
Where was the item purchased?			
Are you the owner of the item?	(If No, then who is the owner and how is the person related to you?)		
Are you the main user of the item?	(If not, then who is the user of the item?)		

**Please Note: We endeavour to provide the replacement of the same colour. However, due to stock restrictions, we may offer replacements in different colours.*



MOBILE PHONES ONLY:

Network (if mobile phone)		Mobile No.	
Date Phone Barred		Time Phone Barred	
Have you received the Replacement SIM?			

DATE AND TIME OF DISCOVERY OF THEFT / LOSS:

Date		Time	
Date and time of last use			
Type of use (internet, text, call)			

POLICE DETAILS:

Station Reported to			
Telephone number			
If not reported at the police station; then how was it reported?			
Date Report made		Time	
Police Reference no.			

COMPLETE DETAILS OF THE INCIDENT

Where was the item at the time of loss / theft?

(Please provide complete description of where was the item kept when it was lost/stolen. For example: the item could be kept in the hand bag, jacket pocket, table etc.)

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Please explain in full how and when the theft/loss occurred and provide full details of the incident. *(Lack of information may result in a delay in processing your claim)*

(Please provide details on a separate sheet, if necessary.)

Do you have any other insurance policy that you could claim under for this same item?

YES/NO

**Have you, within the last 2 years, made a claim under any insurance policy for any gadget?
If so, please provide the following details:**

Company claimed with	
Item claimed on	
Reason for Claim	

(If you have made more than one claim, please provide details on a separate sheet)

Note: IF YOU SUBMIT A CLAIM WHICH IS DECLINED, AND THEN SUBMIT THE SAME CLAIM CHANGING THE CAUSE, THIS MAY BE CONSIDERED AS FRAUD AND APPROPRIATE ACTION WILL BE TAKEN.

DECLARATION:

I declare that the answers given are true and complete to the best of my knowledge and belief, and that if someone has filled in this form on my behalf that I have checked and agreed to the answers. I understand that the information may be checked and passed to other insurance companies or organisations to prevent fraud and I consent to such checks being made and the sharing of my information.

I understand that if I make a claim which is false, exaggerated or fraudulent in any way, my claim will not be paid, the insurance will end with no refund of premium and details of the fraud will be passed to the appropriate authorities for prosecution. If fraud is suspected then details will be passed to the police for further investigation.

In the event of my gadget not appearing on the Police Stolen Equipment National Database (SEND), I understand that Supercover Insurance will register the details.

I understand that if my gadget is replaced, the stolen or lost item is no longer my property and ownership will be transferred to Supercover.

Signed: _____

Date: _____

Print (Policy Holder's Name): _____

CHECKLIST:

When you have completed this form, please check that you have enclosed one or more of the following with it:

- A receipt from the original purchase of the gadget (must include make, model, IMEI/serial number of the gadget and date).
- A despatch note if the phone was posted out to you (must include the make, model, IMEI/serial number of the gadget and date).
- The contract agreement with a Service Provider (if a mobile phone).
- A paper copy of your police report, if you were provided with one

Please note: we DO NOT accept any forwarded emails.