

THEFT CLAIM FORM

Having your caravan stolen is a distressing experience. We will attempt to relieve some of the distress by dealing with your claim as quickly and sympathetically as possible but we will require your assistance and co-operation to do so. Please complete the questions below as fully as possible and email this form, together with any receipts you may have for the stolen items, to caravanclaims@devittinsurance.com or alternatively send by post to: **Devitt Insurance Service Ltd, Caravan Claims Department, North House, St Edwards Way, Romford, Essex, RM1 3PP.**

PLEASE COMPLETE ALL SECTIONS IN BLOCK LETTERS

PERSONAL DETAILS (INSURED):

Title:	Mr/Mrs/Miss/Ms	Forenames:		Surname:	
Address:					
Telephone:				Mobile:	
Email:					
Preferred method of contact:	Email / Telephone / Letter				
Profession / Occupation:				Date of Birth:	

COVER DETAILS:

Cover Number:		Renewal Date:	
Limit of cover (section 1)	£		
Limit of cover (section 2)	£		

If possible please include current schedule

CARAVAN DETAILS:

Make:		Model:		Year:		Axles:	Single/Twin
CRiS VIN Number (or serial/Chassis number):							
Date of purchase:		Price paid:		Current estimate value:			
Purchased from:	(please attach original invoice or receipt)						
Details of any non standard fixtures, fittings or modifications:							
Distinguishing features (Unique to your caravan):							

DETAILS OF THE LOSS:

When was the loss discovered?	Date:	Time:	By whom:
When was the caravan last seen?	Date:	Time:	By whom:
Who discovered the caravan was missing?			
Address where the caravan was left:	(please attach original invoice or receipt)		
When was the theft reported to the police?	Date:	Time:	By whom:
Address of police station concerned:			
Name of officer dealing with case:		Crime Report No:	

The following sections MUST be completed on every occasion

FINANCE DETAILS:

Is any of the property for which you are claiming the subject of any outstanding finance or hire purchase agreement?			
Yes/No	If yes, please answer the following questions:		
Loan in respect of:			
Name and address of finance company:			
Account number:		Date of agreement:	
Amount of loan:	Period of loan:	Amount outstanding:	

OTHER INSURANCE:

Name of house contents insurers:	Policy No:
Address:	
Is there any other insurance policy in force which also covers any of the articles for which you are claiming this policy?	
Yes/No (If yes, please give full details) this includes packages bank account add ons, gadget cover and Travel Insurance	

DECLARATION:

I/We declare that the information given on this form is true and accurate to the best of my/our knowledge and belief.

I/We understand that any claim to obtain benefit that is fraudulent or exaggerated may result in no payment of your claim and cover invalid from the date of claim.

I/We agree that, by submitting this form, the personal information I/WE provide in this form or otherwise may be collected, held, used and disclosed in the manner set out in the Caravan and Motorhome Club Privacy Policy found at www.caravanclub.co.uk/privacy-policy.

Signature (s) _____ Date: _____

_____ Date: _____