

Leadenhall Claim Form - Motor Vehicle Damage Overseas Motor Insurance

Please obtain two estimates and email them to us. If estimates have been sent to us, and provided total costs do not exceed GBP 750, you may give your own authority for work to proceed. If the vehicle is not in use, please advise us of the address where the vehicle can be examined and provide a contact name, telephone number and email address.

1 Preliminary Claims Advice

Name		Policy number	
Residential address		Phone number	
		Mobile number	
		Email address	

2 Particulars of the Accident / Loss

Date		Brief description of the incident
Time		
Location		

3 Damage to your vehicle

Brief details of the damage	
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4 Details of the Vehicle

Make		Registration number	
Model		Chassis number	
Year			

5 Details of the Last Person in charge of the Vehicle

Title (Mr, Mrs, Miss, Ms etc)		Occupation	
Forename		Age	
Surname		Date passed driving test	

We have negotiated an agreement with the insurers under which we act as agent for insurers in the handling of this claim. This enables us to give a faster and more efficient claims service to our clients. We will take care to handle this claim to ensure that your interests will be properly protected and refer any conflicts over handling or cover back to insurers, should they arise.

Signed		Date	
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Please return this form by email to motorclaims@leadenhall-eu.com.

Leadenhall Claim Form - Motor Vehicle Theft Overseas Motor Insurance

1 Details of the Policyholder

Name

Residential address

Policy number

Phone number

Mobile number

Email address

2 Details of the Stolen Vehicle

Make

Model

Year

Registration number

Chassis number

3 The Occurrence

Date of theft

Time of theft (am/pm)

Location/address of theft

Date reported to police

Time reported to police

Police station address

Crime reference number

Was the vehicle locked and the ignition key removed prior to the theft? Yes No

Who was in charge of the vehicle immediately before the theft?

Was the alarm set? Yes No Was the vehicle in a locked garage? Yes No

Please state the circumstances in which the theft occurred

4 If the vehicle has been recovered and has sustained damage, please complete this section

Details of damage

Where may our engineer inspect the vehicle?

Is the vehicle there now? Yes No

5 If the vehicle has not yet been recovered, please complete this section and provide supporting documentation

Mileage at time of theft		Date of last service	
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Please tick to indicate if the vehicle has any of the following security devices

Alarm	<input type="checkbox"/>	Immobiliser	<input type="checkbox"/>	Tracking device	<input type="checkbox"/>	Other (please state)	
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Details of extras fitted to the vehicle	
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6 Please provide any additional supporting information you may have

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If your vehicle has not been recovered we shall also require:

1. Both sets of keys
2. Purchase Receipt
3. Any service documents available

Please note that there is a statutory six week waiting period for vehicles which are not recovered after a theft.

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Policyholder's signature	
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Date	
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Driver's signature	
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Date	
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Please complete this form and return to motorclaims@leadenhall-eu.com