

# YellowJersey

## ACCIDENT CLAIM FORM

### ABOUT YOU

Name	Mr Leigh Taylor
Email	leedhamwilliam+annualultimatetest@gmail.com
Date of Birth	03/02/1989
Policy Number	YJTW365U002484
Policy Start Date	04/05/2018
Mobile Number	0
Address	7 Magnolia Court Redcar
Postcode	TS10 2UB

### INCIDENT DETAILS

Date of Incident  
01/06/2018

Time of Incident  
01:00

Location of incident  
Incident description

Who was using the bicycle at the time of the incident?  
I was in charge of the bicycle

### CIRCUMSTANCES

The circumstances of my accident are long and harrowing. I do not have the resolve to repeat them here.

### WITNESSES

Yes

I didn't like the look of them, so didn't ask.

### THIRD PARTY DETAILS

No

## WAS THE INCIDENT REPORTED

Yes

Police details (Officer Number)  
Officer Dibble

Police station details  
Yellow Jersey,  
Prospero, 7 London Road

Police station contact number  
03330030046

Reference number  
02081239877

## ITEMS CLAIMED FOR

Cervelo S3 | Insured Value: £3900  
Ribble R872 | Insured Value: £1200  
Fixed Accessories | Insured Value: £450  
Helmet and Clothing | Insured Value: £250

Does your claim relate to a damaged carbon frame or wheelset?  
Yes

Bicycle damage details  
New bike please.

## ADDITIONAL INFORMATION

Have you ever insured your bicycles with another insurer?

Yes

Previous insurer

Pedalplan

Expiry date

01/01/17

Details of any bicycle or cycling related claims in the past 3 years

No previous claims

Do you have any criminal convictions which you are required to disclose to us?

No

N/A

Have you ever had a policy canceled or void by another insurer?

Yes

My policy was cancelled unjustly by Yellow Jersey. All I did was attack the driver of a car who defiantly deserved it.

Have you ever had your insurance renewal refused, or special terms imposed?

No

N/A

Do you agree to the following declaration?

Yes

## **DECLARATION**

I declare that the information contained in this form is true to the best of my knowledge and I have not withheld any information connected with this claim. I accept that if I exaggerate any part of this claim, or make any false declaration or statement, I shall not be entitled to receive any benefit under this policy in respect of this claim. Furthermore, I accept that any such action on my part may render me liable to prosecution. I further agree to provide any further information or documentation as may be reasonably required. I understand that you may seek information from other insurers to check answers that I have provided. By returning this form electronically via the Yellow Jersey website in the absence of a signature constitutes acceptance of the declaration.

**IMPORTANT NOTICE:** Insurers and their agents share information with each other to prevent fraudulent claims and for underwriting purposes via the Claims Underwriting Exchange register operated by Insurance Datatype Services Ltd. A list of participants is available upon request. The information you supply on this form, together with the information you have supplied on your insurance and any other information related to the claim, will be supplied to participants.