# YellowJersey THEFT REPORT FORM

# **ABOUT YOU**

Name Mr Mickey Mouse

Email yellow.jersey.insurance+newbiztest03b@gmail.com

Date of Birth 08/09/1974

Policy Number YJTW365U004578

Policy Type Performance
Policy Start Date 01/02/2019
Mobile Number 07897654321

Address 3 Oaklands Haslemere

Postcode GU27 3RD

# **CLAIM DETAILS**

trek | Insured Value: £2000

Items insured by Yellow Jersey stolen in the incident ii

Approximate replacement value of stolen items 2000

#### **CIRCUMSTANCES**

Please describe the circumstances of the theft jj

# THEFT DETAILS

Location:

jj

Who was responsible for the bicycle?

How long was the bicycle left unattended? 1 hour

Time and date bike was last seen by you 01/02/2019 10:00

Time and date theft was discovered 01/02/2019 11:00

#### WITNESS

Were there any witnesses to the theft?

Witness details if available

# **POLICE DETAILS**

Name and address of Police Station theft was reported to

Police Station contact number

Crime incident number

Did the police attend the scene?

Was the theft reported to the police immediately? Yes

If the theft wasn't reported to the police immediately, what was the reason for the delay?

# **SECURITY**

Please detail how the bicycle was secured when it was stolen ii

If the bicycle was secured with a bicycle lock, please detail the lock make and model

If the bicycle was stolen from a vehicle, how was access gained to the vehicle, and which security devices were fitted and in operation at the time?

If a bicycle lock was not required at the time of the theft, please state the alternate security methods?

# **ADDITIONAL INFORMATION**

Have you ever insured your bicycles with another insurer? No
Previous insurer N/A

Expiry date N/A

Details of any bicycle or cycling related claims in the past 3 years  $\ensuremath{\mathrm{N/A}}$ 

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? No

N/A

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 electrically 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.