YellowJersey ACCIDENT CLAIM FORM

ABOUT YOU

Name Mr Tom Mcmorrin

Email tom@yellowjersey.co.uk

Date of Birth 19/01/1986

Policy Number YJTW365U004699

Policy Cover Ultimate
Policy Start Date 18/02/2019

Mobile Number 07590200246

Address 155 Brondesbury Park

London

Postcode NW2 5JL

INCIDENT DETAILS

Date of Incident 01/01/2018

Time of Incident 00:00

Location of incident

a

Who was using the bicycle at the time of the incident?

а

CIRCUMSTANCES

a

WITNESSES

No

N/A

INJURY

Yes

THIRD PARTY DETAILS

No

WAS THE INCIDENT REPORTED

No

Police details (Officer Number) N/A

Police station details

N/A

Police station contact number N/A

Reference number N/A

ITEMS CLAIMED FOR

test | Insured Value: £5000 Fixed Accessories | Insured Value: £500

Does your claim relate to a damaged carbon frame or wheelset? No

Bicycle damage details

a

ADDITIONAL INFORMATION

Have you ever insured your bicycles with another insurer?	
No	

Previous insurer

N/A

Expiry date

N/Ā

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?

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.