YellowJersey THEFT REPORT FORM

ABOUT YOU

Name Mr Pifthree Pifthree

Email yellow.jersey.insurance+pif3@gmail.com

Date of Birth 18/03/1984

Policy Number YJTW365U005511

Policy Type Ultimate
Policy Start Date 22/07/2019

Mobile Number 07700123456

Address 8 Old Court Road

Guildford

Postcode GU2 7UF

CLAIM DETAILS

13 | Insured Value: £3000

Fixed Accessories | Insured Value: £500

Wheelsets | Insured Value: £500

Items insured by Yellow Jersey stolen in the incident

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Approximate replacement value of stolen items

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CIRCUMSTANCES

Please describe the circumstances of the theft Testing updated claim auto emails

THEFT DETAILS

Location:

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Who was responsible for the bicycle? Testing updated claim auto emails

How long was the bicycle left unattended? Testing updated claim auto emails

Time and date bike was last seen by you 22/12/2018 00:00

Time and date theft was discovered 21/07/2019 19:00

WITNESS

Were there any witnesses to the theft? Yes

Witness details if available Testing updated claim auto emails

POLICE DETAILS

Name and address of Police Station theft was reported to Testing updated claim auto emails

Police Station contact number Testing updated claim auto emails

Crime incident number Testing updated claim auto emails

Did the police attend the scene? No

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 Testing updated claim auto emails

If the bicycle was secured with a bicycle lock, please detail the lock make and model Testing updated claim auto emails

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?

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If a bicycle lock was not required at the time of the theft, please state the alternate security methods? Testing updated claim auto emails

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.