

# YellowJersey

## THEFT REPORT FORM

### ABOUT YOU

Name	Mr Tom Mcmorrin
Email	tom@yellowjersey.co.uk
Date of Birth	22/07/1989
Policy Number	YJTW365U004194
Policy Type	Ultimate
Policy Start Date	21/11/2018
Mobile Number	0
Address	50 Bodmin Street London
Postcode	SW18 4PT

### CLAIM DETAILS

Rose SL Pro 2000 | Insured Value: £1900  
Fixed Accessories | Insured Value: £250  
Helmet and Clothing | Insured Value: £500

Items insured by Yellow Jersey stolen in the incident  
Final test

Approximate replacement value of stolen items  
500

### CIRCUMSTANCES

Please describe the circumstances of the theft  
Final test

### THEFT DETAILS

Location:  
Final test

Who was responsible for the bicycle?  
Final test

How long was the bicycle left unattended?  
5 hours

Time and date bike was last seen by you  
15/02/2019 16:00

Time and date theft was discovered  
20/06/2019 18:00

## **WITNESS**

Were there any witnesses to the theft?

No

Witness details if available

## **POLICE DETAILS**

Name and address of Police Station theft was reported to

Final test

Police Station contact number

123456789

Crime incident number

123456789

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

Final test

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

Final test

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?

Final test

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

Final test

## ADDITIONAL INFORMATION

Have you ever insured your bicycles with another insurer?

Yes

Previous insurer

Final test

Expiry date

225588

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

Final test

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 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.