

Motor Theft Claim Form

Please help us to help you by:

- making sure the information you give is as clear and complete as possible
- completing all the relevant sections of this form
- remembering to sign and date this form



Claim reference

I. Insured:

Policy number

Name

Address

Telephone numbers

Home

Work

Mobile

Occupation

Email address

Are you registered for VAT ?

Yes ☐

No ☐

VAT Number:

2. Insured's Vehicle:

Make and Model

Registration number

Are you the registered owner?

Yes ☐

No ☐

If 'No' state name and address of owner

Address

Name of the main user of the vehicle:

Was an immobiliser fitted to the vehicle?

Yes ☐

No ☐

Is the vehicle the subject of a Leasing or a Hire Purchase Agreement ?

Yes ☐

No ☐

Name of Leasing or Hire Purchase Company:

Address

Account number

Do you suffer from any infirmity or disease ?

Yes ☐

No ☐

If 'Yes', please provide details

Have you had any previous accidents or claims ?

Yes ☐

No ☐

If 'Yes', please provide details

Have you ever been convicted of either a criminal or a motoring offence ?

Yes ☐

No ☐

If 'Yes', please provide details

Are proceedings pending for either a criminal or motoring offence ?

Yes ☐

No ☐

If 'Yes', please provide details

Has the vehicle been recovered?

If Yes please proceed to section 3

If No please proceed to section 4

3. Damage to Insured's Vehicle:

If the damage to your vehicle is covered, using one of our Recommended Repairers offers advantages including guaranteed repairs and speedier settlement of your claim. If not previously advised details of your nearest Recommended Repairer can be obtained by phoning 1890 92 42 28.

Details of damage

Repairers name

Address

Telephone

Estimated cost of repairs

Where can the vehicle be inspected ?

Please proceed to Section 5

4. Unrecovered Vehicles:

This information is available on your ownership documents.

Chassis / VIN number

Year of Make

Mileage

Date of purchase

Price paid

Estimated value at time of loss

Please describe any modifications or extras fitted to the vehicle

What enquiries have been made and action taken to recover the vehicle?

Please proceed to Section 5

5. Circumstances:

If known, describe how the vehicle was stolen

Date vehicle was last seen

Time

am/pm

Place vehicle was last seen

Name of last person in charge

Address

Date of birth

Driving licence number

Was the last person in charge employed by you?

Yes ☐

No ☐

Date loss/damage was discovered

Time of loss or damage

am/pm

Was the vehicle in a garage?

Yes ☐

No ☐

Was the vehicle locked and the key removed?

Yes ☐

No ☐

Was immobiliser fitted and in operation?

Yes ☐

No ☐

Address of Garda station to which loss was reported to	<div></div> <div></div>
Crime or PULSE number	<div></div>
Has anyone been held amenable for the theft?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If 'Yes' give details	<div></div>

State purpose for which vehicle was being used prior to theft

Garda Stamp

If the loss of vehicle or contents is covered by any other insurance give details:

Insurer Name	<div></div>
Insurer Address	<div></div> <div></div>
Policy Number	<div></div>

6. Articles in Insured Vehicle:

If covered by the policy please complete in the event of theft or damage to articles in the Insured vehicle.

Please also forward receipts/estimates in support of your claim.

1. Description of Article	<div></div>		
Date of purchase	<div></div>		
Current replacement price	€ <div></div>	Amount claimed after wear/tear	€ <div></div>
If property not your own, give owner name	<div></div> <div></div>		
2. Description of Article	<div></div>		
Date of purchase	<div></div>		
Current replacement price	€ <div></div>	Amount claimed after wear/tear	€ <div></div>
If property not your own, give owner name	<div></div> <div></div>		
3. Description of Article	<div></div>		
Date of purchase	<div></div>		
Current replacement price	€ <div></div>	Amount claimed after wear/tear	€ <div></div>
If property not your own, give owner name	<div></div> <div></div>		
4. Description of Article	<div></div>		
Date of purchase	<div></div>		
Current replacement price	€ <div></div>	Amount claimed after wear/tear	€ <div></div>
If property not your own, give owner name	<div></div> <div></div>		

Declaration

- 1. I/We hereby declare that the above statement and information furnished by me/us or on my/our behalf are true and complete in every respect
- 2. I/We have disclosed all information in my/our possession
- 3. I/We am aware that it is a CRIMINAL offence to defraud, or to attempt to defraud an insurer and that should I/we do so I/we may be prosecuted
- 4. I/We understand that RSA may seek information from other insurance companies to check the information I/we have provided
- 5. I/We understand that RSA will pass the information on this claim (and any incident of which I/we may provide details) to Insurance Link and other industry databases where it would be available to other insurance companies
- 6. I/We also understand, in response to any searches related to such information provided, Insurance Link and other insurance companies may pass onto RSA information it has received about other incidents involving anyone insured under the policy.

Signature(s)

(Insured)

Date

__/__/__

Signature(s)

(Driver if different)

Date

__/__/__

RSA Insurance Ireland Limited records and data are kept and used in accordance with the Data Protection Act.

IMPORTANT

If the vehicle has been stolen and has not been recovered when returning the form please include the following:

- Vehicle licencing cert and all available keys
- Any servicing documents and NCT certificate
- Insurance Certificate
- When sending the vehicle registration documents please sign your name against “Sellers Signature”.

Additional Information

DATA PROTECTION NOTICE

RSA Insurance Ireland Ltd recognise that protecting personal information, including sensitive personal information, is very important and we recognise that our policyholders have an interest in how we collect, use and share such information.

Please read the following carefully as it contains important information relating to the information that is provided to us in connection with this insurance policy, either by or on behalf of the policyholder. If information is provided relating to any individual, the Policyholder is responsible for obtaining the individual's consent to the use of their data in the manner outlined below.

What does RSA do with Personal Data?

Information provided will be used by RSA for the purposes of processing the application for insurance and administering the insurance policy. RSA may require sensitive data relating to individuals (such as medical, health or conviction data) in order to process the application and/or any claim made. By providing such data you explicitly consent to it being retained and used and verified by RSA for the purposes set out in this Notice.

While RSA may disclose data to the policyholder and to any individuals related to the policy or their representatives, all information supplied will otherwise be treated in confidence by RSA. In particular, RSA will not disclose personal data to any third parties except

- a) to our agents, subcontractors and re-insurers
- b) to third parties involved in the assessment, administration or investigation of a claim,
- c) where consent has been received or
- d) where required or permitted by law.

In order to provide policyholders with products and services this information will be held in the data systems of RSA or our agents or subcontractors. RSA may pass information to other companies for processing on our behalf. Some of these companies may be based outside the EEA, but in all cases RSA will ensure that its transfers of data are lawful and that information is kept securely and only used for the purposes for which it was provided.

Calls to RSA may be recorded for quality assurance or verification purposes.

Fraud prevention, detection & claims history

In order to prevent and detect fraud and the non-disclosure of relevant information RSA may at any time:

- Share or verify information with companies within the RSA Insurance Group, other organisations outside the RSA Insurance Group including where applicable private investigators and public bodies including An Garda Síochána;
- Check and / or file details with fraud prevention agencies and databases, and if false or inaccurate information is given to us and we suspect fraud or a breach of a policy condition, we will record this. RSA may also search these agencies and databases to:
 - a) Help make decisions about the provision, refusal and administration of insurance, credit and related services for the policy holder and/or any person relevant to the policy (e.g. named drivers).
 - b) Trace debtors or beneficiaries, recover debt, prevent fraud and to manage accounts or insurance policies;
 - c) Check identity to prevent money laundering, unless other satisfactory proof of identity is supplied to us;
 - d) Undertake credit searches and additional fraud searches.

Insurance Database

Information about claims (whether by our customers or third-parties) made under policies that we provide is collected by us when a claim is made and is placed on an insurance industry database of claims known as Insurance Link. This information may be shared with other insurance companies, self insurers or statutory authorities.

Insurance companies share claims data:

- a. to ensure that more than one claim cannot be made for the same personal injury or property damage
- b. to check that claims information matches what was provided when insurance cover was taken out
- c. and, when required, to act as a basis for investigating claims when our recorded information is incorrect or when we suspect that insurance fraud is being attempted.

The purpose of Insurance Link is to help us identify incorrect information and fraudulent claims and, therefore, to protect customers. Guidelines for sharing information with other insurance companies, self-insuring organisations or statutory authorities are contained in the Data Protection Commissioner's Code of Practice on Data Protection for the Insurance Sector which is available at www.dataprotection.ie

Under the Data Protection Acts 1988 and 2003 you have a right to know what information about you and your previous claims is held on Insurance Link. If you wish to exercise this right then please contact us at the address below.

How to contact us:

On payment of a small fee an individual is entitled to receive a copy of the information we hold about them and to seek rectification of any inaccurate data. If you have any questions, or you would like to find out more about this notice you can write to the Data Protection Officer, RSA Insurance Ireland Ltd, Dundrum Town Centre, Sandyford Road, Dundrum, Dublin 16.



RSA, RSA House, Dundrum Town Centre, Sandymount Road, Dundrum, Dublin 16.

Telephone: 1890 290 100 Facsimile: (01) 290 1001

RSA Insurance Ireland Limited is registered in Ireland under number 148094
with registered office at RSA House, Dundrum Town Centre, Sandymount Road, Dundrum, Dublin 16.

RSA Insurance Ireland Limited is regulated by the Central Bank of Ireland.