

Stolen or Burnt Vehicle Claim Form

If you need any help with this form, please contact the nearest NZI Office or your insurance advisor



- We recommend that you read the Claims section of your policy.
- Please answer all the questions on this form. If a question does not apply to your claim, please answer "N/A".
- You must not incur any expense (unless it is to minimise the loss), or admit fault, without our permission.
- THE INSURED MUST COMPLETE THE DECLARATION IN PART 'R' OF THIS FORM, AND HAVE IT WITNESSED.

Part A: THE INSURED

1. Name of Insured:
2. Postal Address:
3. Best contact Phone No: Best time to contact:
4. Alternative contact:

Part B: DETAILS OF DRIVER OR LAST PERSON TO USE VEHICLE

1. What is Date of Birth of the driver (or last person to use the vehicle)? Female Male
2. Was this the person shown under Part A? Yes No
If the answer is "Yes" please go straight to Part C. If the answer is "No" please answer questions 3 - 8
3. Full Name:
4. Postal Address:
5. Best contact Phone No: Best time to contact:
6. Relationship to the Insured: Husband Wife Son Daughter Other (give details).....
7. Did the driver have the owner's permission to use the vehicle? Yes No
8. Does the driver have any motor vehicle insurance? Yes No

Part C: DRIVER'S HISTORY

1. In the past 5 years has the driver (or last person to use vehicle):
 - (a) been involved in a motor accident? Yes No
 - (b) been convicted of a driving offence (including speeding) or issued with an offence notice? Yes No
 - (c) been disqualified from driving or had their licence endorsed cancelled or suspended? Yes No
2. Has the driver ever been refused vehicle insurance or had a policy cancelled or not renewed? Yes No

If any answer is "Yes" please attach full details on a separate piece of paper

Part D: DRIVER'S LICENCE

1. Number.....	Classes (circle which applies)	Special Conditions (circle which applies)
2. Type.....	A, B, C, D, E, F,	A, B, C, D, E, F,
3. Date & Country of Issue.....	G, H, I, J, K, or L	G, H, I, J, K, or NIL

Part E: INSURED VEHICLE

1. Make.....
2. Model.....
3. Badge (GL GLX etc).....
4. Number of Doors.....
5. Year.....
6. Milage.....
7. Registration Number.....
8. Vin Number.....
9. Chassis.....
10. Engine Number.....
11. Colour.....
12. Engine Rating.....
13. What do you think the vehicle was worth at the time of Loss? \$.....
13. Engine Type: Carburettor Fuel Injected Turbo Charged
14. Transmission: Manual Automatic 4WD
15. Number of speeds: 3 4 5
16. Power steering: Yes No
17. Fuel: Petrol Diesel CNG LPG
18. Air Conditioning: Yes No
19. Electric windows: Yes No
20. Number of previous owners.....
21. Roof: Standard Convertible Cabriolet Sunroof
22. Japanese 2nd Hand Import: Yes No
23. Has the vehicle been modified from the manufacturer's standard design or specification: Yes No
24. Was the vehicle a Kitset or Replica? Yes No

If "Yes" to questions 23 or 24, please give details.....

OFFICE USE: Policy No..... Branch.....

**Part F:
OWNERSHIP
AND
FINANCE**

1. Who is the Registered Owner on the Vehicle Ownership Papers?
.....
2. Is the vehicle subject to any Hire Purchase or any other finance arrangements? Yes No
If "Yes" please give full details (include the contact address of any finance company etc).
.....
3. Who has the ownership papers?
4. When did you buy the vehicle?
5. Who did you buy it from?
6. How much did you pay for it? \$..... How much was your deposit? \$.....

**Part G:
HOW THE
LOSS
HAPPENED**

1. When did the loss happen? Day..... Date..... Time..... AM PM
2. Where did it happen? (show street and town)
3. Who was the last person to use your vehicle?.....
4. What did they use it for?.....
5. Did the last person to use the vehicle consume or use any alcoholic liquor, drug or intoxicating substance in the 12 hours before they left it? Yes No
If "Yes", What?..... How Much?..... When?.....
6. Please show whether these applied to your vehicle when it was left by the last person to use it:

a) all windows wound up?	e) keys elsewhere in the vehicle?
b) all doors locked?	f) steering lock fitted?
c) boot or hatch locked?	g) alarm operating?
d) keys left in the ignition?	h) immobiliser operating?
7. Please describe what happened to your vehicle
8. Please draw a diagram of the place where it happened (show buildings, driveways, roads etc.):

**Part H:
POLICE
REPORT**

1. Has this loss been reported to the police? Yes No If "No", it must be reported to the police and question 2 answered
2. Is a Police Complaint Acknowledgement attached? Yes No If "No", please complete the details below
Reported by.....to (Station Name).....
on.....Complaint Ref.No.....Name of Attending Officer.....

**Part I:
USE AND
GENERAL
CONDITION**

1. What was the vehicle mainly used for? Private Business
2. Was the vehicle already damaged before the loss or theft happened? Yes No
If "Yes", please give details of existing damage
3. Please give a brief description of the condition of each of these (eg good, average for age, poor etc)

Engine.....	Paintwork.....
Gearbox.....	Seats.....
Transmission.....	Suspension.....
Door Trims/Handles.....	Steering.....
Body Areas.....	
4. Has the radiator/cooling system been repaired or replaced recently? Yes No If "Yes", please give details

5. Has the exhaust system been repaired or replaced recently? Yes No **If "Yes", please give details**

 6. Was there rust on any part of the vehicle? Yes No **If "Yes", please give details**

 7. Did you regularly carry pets in your vehicle? Yes No
If "Yes", what type of animal? How often? Every Day Every Week Every Month

**Part J:
WHEELS
AND TYRES**

1. Tyres: Please give details for each tyre:
- | | Date Purchased | New or Used | Approximate Km Travelled |
|-------------|----------------|-------------|--------------------------|
| Front Left | | | |
| Front Right | | | |
| Rear Left | | | |
| Rear Right | | | |
| Spare | | | |
2. What type of wheels did the vehicle have? Manufacturers standard Mag Wheels Other
If "Other" please give details

**Part K:
VEHICLE
INTERIOR**

1. What type of interior trim did the vehicle have? Vinyl Cloth Wool Leather
 2. What colour was the interior trim?
3. How many seatbelts were in your vehicle?
4. Did your vehicle have any identifying features? (eg: stickers/badges/signwriting) Yes No **If "Yes", please give details**

5. What colour were the fitted carpets in your vehicle?
6. What condition was the dashboard? (any cracks?)
7. Did you have additional floor mats in the vehicle? Yes No
If "Yes", what type? Rubber Carpet Other.....

**Part L:
VEHICLE
CONTENTS**

1. What items were in the
 Glove compartment.....
 Side Door Pockets.....
 Boot/Hatch.....
2. Did you have any other contents in your vehicle at the time of the loss? Yes No **If "Yes", please give details**

**Part M:
KEYS**

1. Do you have the keys for your vehicle? Yes No **If "Yes", please give the serial numbers below**
 Door..... Ignition..... Boot/Hatch..... Fuel Cap.....
If "No", where are they?
2. Did anyone else have keys to the vehicle? Yes No **If "Yes", please give their details (name, address, contact phone)**

3. Did anyone else regularly use the vehicle, but not have a set of keys? Yes No
If "Yes", please give their details (name, address, contact phone)

**Part N:
OTHER
EQUIPMENT**

- Please tick any of these which were fitted to your vehicle, and give details (make, model, age, value etc):
- Engine Immobiliser/ Car Alarm
- Phone
- Radar Detector
- Roof Rack or Carrier
- Child Safety Seat

**Part O:
RADIO/
STEREO**

1. Did your vehicle have a Radio, Stereo or CD System? Yes No **If "Yes"**, please answer questions 2 - 4 below.
2. How was it fitted? Factory fitted by the manufacturer Installed by you since you purchased the car
Not manufacturer fitted, but in the car when you purchased it
3. If not factory fitted, do you have receipts or guarantee documents? Yes No
4. What Make & Model was it?
5. Please list all components with serial numbers if you have them.....
.....
.....
.....

**Part P:
SERVICE
HISTORY**

1. Who did the last service on the vehicle? Date:...../...../.....
2. Where was your vehicle usually serviced?
3. Do you have copies of your servicing invoices/accounts? Yes No
4. Did the vehicle have a current Warrant of Fitness? Yes No
If "Yes", where was the WOF obtained?..... When does the WOF expire?.....
5. Did your vehicle need extra oil between services? Yes No
If "Yes", how much? every 1000 Km..... each month..... each petrol fill.....
6. Did your vehicle run well? Yes No **If "No"**, please give details of any problems.....
.....

**Part Q:
OTHER
DETAILS**

1. Is there any other information which would help us with your claim? Yes No **If "Yes"**, please give details
.....
.....
2. Please tick any of the following documents you can give us, and supply them with this form:
Ownership Papers Vehicle Inspection Certificate Service Manual Receipts for Servicing Owners Manual
Other please give details.....

**Part R:
DECLARATION
AND
SIGNATURE
Please read
and sign**

- **This is a statutory declaration under the Oaths and Declarations Act 1957. It is a criminal offence to sign this declaration knowing that any of the statements under 1 below are not true.**
- **The person who signs this declaration signs it on behalf of all insureds.**
- **It must be witnessed by one of the people listed (e.g. solicitor).**

I(full name)
of(address)
.....(occupation)

1. Solemnly and sincerely declare on behalf of all insureds that:
(a) all information given to New Zealand Insurance in connection with this claim (whether oral or written) is true and correct;
(b) no information relevant to the claim is omitted; and

2. Agree that:
(a) my personal information collected by New Zealand Insurance in connection with this claim may be disclosed to:
(i) other members of the insurance industry and Insurance Claims Register Ltd;
(ii) parties repairing or replacing the subject matter of the claim;
(iii) parties who have a financial interest in the subject matter of the policy;
(b) my personal information held by any other parties in connection with this claim may be disclosed to New Zealand Insurance;

AND I make this solemn declaration conscientiously believing the same to be true and by virtue of the Oaths and Declarations Act 1957

DECLARED at
this.....day of.....year.....

**Signed on behalf
of all Insureds**

before me

Justice of the Peace / Solicitor / Registrar or Deputy Registrar of High or District Court / a person authorised by Sect.9 Oaths and Declarations Act 1957.

Please note:

- We gather information about you (including your claims history) to consider your claim. The terms of your insurance policy require you to supply this information, and if you refuse to provide it, we may decline your claim.
- This information is held by us and you may access it. It may be passed onto other insurers you deal with, repairers and mortgagees etc.
- Your claims history is passed onto, and held by Insurance Claims Register Ltd. This enables other insurers you deal with to access it, and prevents fraudulent claims.