

Trailer and Caravan Insurance Claim Form

We understand that you wish to claim under your Insurance Policy. To do so, you should complete both pages and return this form together with estimates for repair or replacement. Please note that your policy provides wide ranging cover and the risks you are insured against are listed in your policy. Before submitting your claim please check that the loss or damage is covered by your policy. If you are in doubt about any aspect of your claim, please contact us for clarification.

1. Your details:		
Policy number:	Referer	nce No:
Policyholder name:	Teleph	one No:
Correspondence address:		
Risk address (if different):		
2. Details of the Touring Caravan or	railer:	
Make & Model:	Age or Year of	manufacture:
Serial Number:		
2. Full dataile of how the loop or down		
3. Full details of how the loss or dam	_	
Time of Incident:	am/pm Date of Incident:	
Was the Caravan/trailer being used at the time?	/N.	
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4. In the case of theft, accidental loss	or malicious damage:	
Date you informed the police:	Crime,	lost property or incident ref:
Recording officer's number:	Police:	station phone number:
Police station address:		

5. Details of the items for which you are claiming (continue on a separate sheet if necessary):			
Description: Age of item/price paid: Amount Claimed:			
6. Do you hold any other policies that may cover thes	se items or this type of loss? Yes/No		
(e.g home contents or travel insurance)? If yes:			
	Policy number:		
Insurer address:	·		
Insurer phone number:			
7. Do you consider any third party to be responsible	for the loss? If yes:		
Third party name & address:			
Motor vehicle registration number:	Driver name:		
Third party insurer:	Policy number:		
Insurer's address:			
8. Were there any witnesses to the incident? If yes:			
Witness name & address:			
9. Consent to Handle:			
I confirm that I authorise Stoneways Insurance Services Ltd to handle	my claim on behalf of the insurers:		
Signature:	Date:		
Print name:			
Important Notes:			
Insurers pass information to the Claims and Underwriting Exchange Re to help us check information provided and also to prevent fraudulent of give rise to a claim, we will pass information relating to it to the register	laims. When you tell us about an incident which may or may not		
In assessing claims made insurers may also undertake checks against roll, county court judgements, bankruptcy orders or repossessions.	t publicly available information as necessary such as electoral		
Some of the information which you give us about this claim may be pagive us information about your policy with them, and we may ask them normal practice where two or more policies cover the same thing.	·		
10. Declaration:			
I/we declare that the statements made are true to the best of my/our knowledge and belief and I/we claim the amount above in respect			
of the items mentioned. I/we understand that you may ask for information from other insurers to check the answers I/we have provided.			

Signature: Date:

Stoneways Insurance Services Ltd., Muscott House, 6 Meadrow, Godalming, Surrey GU7 3HL.