

broken windscreens only



Underwritten by Wesfarmers General Insurance Limited, ABN 24 000 036 279
Level 1, 369 High Street, Kew VIC 3101
Tel: 133 LSV (133 578) Fax 1300 854 311

NB. This claim form is to be used for Broken Windscreens Only. If there is any other damage the company's ordinary motor vehicle claim form must be used. Please complete all questions even if they appear irrelevant.

1. Insured Details

Insured's name *(BLOCK letters - Please give full name)* Age

Address Postcode

Phone number (w) Phone number (h) Mobile number

"Comprehensive" Policy number From *(dd/mm/yyyy)* To *(dd/mm/yyyy)*

Driver's name Driver's age

Licence number Expiry date *(dd/mm/yyyy)*

2. Goods and Services Tax (G.S.T.)

To ensure you do not incur any unnecessary GST liabilities on this claim please advise your ABN, if applicable

Entitlement to an Input Tax Credit in respect of the

(i) insurance premium % and; (ii) vehicle which is the subject of this claim %

3. Particulars of Insured Vehicle

Make of vehicle Model Year

Engine number Registered number

Date of breakage *(dd/mm/yyyy)*

Was broken windscreen? *(tick as appropriate)*
Zone toughened Laminated Tinted Banded Armour plate

Was windscreen struck by stone? Yes No If No, state cause

NB. If these questions do not cover facts of incident please give general description overleaf.

Lumley Special Vehicles

www.lsvinsurance.com.au
Tel: 133 LSV (133 578) Fax 1300 854 311.

4. Replacement Details

On receipt of the account for replacement please: (delete item not applicable)

1. Pay the repairer direct
2. Forward your cheque to me/us

IF WINDSCREEN HAS BEEN REPLACED, ATTACH RECEIPT OF ACCOUNT

5. Complaints Procedure

Complaints Procedure

If you are unhappy with any decision we may make in relation to our management of this claim please contact us and we will attempt to resolve your complaint immediately. If we are unsuccessful in resolving the matter we will refer it to our Internal Dispute Resolution Committee (IDRC) for further consideration.

If you are unhappy with our IDRC decision you may refer your dispute to the Financial Ombudsman Service (FOS). The FOS provides a free and independent dispute resolution service for consumers who have general insurance disputes that are covered by its Terms of Reference. If you wish your dispute to be heard by the FOS, you must refer your dispute to the FOS within three calendar months of receiving our IDR decision and you can do this by contacting the FOS at:

Financial Ombudsman Service

Freecall 1300 78 08 08

Post: GPO BOX 3, Melbourne Victoria 3001

Website: www.fos.org.au

Email: info@fos.org.au

6. Privacy

We respect your privacy and we comply with the Privacy Act 1988 and the National Privacy Principles. A copy of our Privacy Policy is available on our website www.lsvinsurance.com.au or contact us on 1300 369 769 for further information.

7. Declaration

This information is, to the very best of my knowledge, true in every respect.

I/We understand the claim may be refused or reduced if information is not true or is withheld.

I/We authorise the insurer to disclose information contained herein to their advisors, reinsurers and to other insurers. I/We authorise the insurer to obtain from any other party information that is, in the insurer's view relevant to this claim.

Signature

Date (dd/mm/yyyy)

General Description (if required)