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N.R.M.A. INSURANCE LIMITED

Motor Vehicle CLAIM FORM



CLAIM NUMBER PB25669	CODE 3	SUB-CODE PK
Excess \$ 100	A.E. \$ 2999 TL	

FIRE OR THEFT ONLY

IT IS IMPORTANT THAT THE FOLLOWING BE COMPLETED FOR PROMPT SETTLEMENT OF THIS CLAIM

NAME OF INSURED (As shown on policy) **NP59** Occupation **Press worker**

ADDRESS OF INSURED **Parramatta 2151** Telephone Nos. **[Redacted]**

DATE OF INCIDENT **27/9/80** TIME **12:30 A.M./P.M.**

MOTOR VEHICLE POLICY No. **[Redacted]** FROM **20.3.80** TO **20.3.81**

If policy not yet issued, please state receipt number _____ Office of issue **Parramatta**

Year of manufacture **1973** Make of vehicle **ESCORT** Model of vehicle **73** Body type **SEDAN**

Colour **Yellow** Engine number **[Redacted]** Reg. No. **[Redacted]** Sum insured \$ **2999**

Name of interested party _____ Contract No. _____

Is Insured a FINANCIAL member of the National Roads & Motorists' Association? _____ Membership No. _____

State which Company issued your Compulsory Third Party Policy _____ Expiry Date _____

Person in charge of vehicle Name **NP58** Age **17 1/2** Sex **Male** Address **[Redacted] Parramatta**

Driver's Licence No. **[Redacted]** Expiry date **10 September 81**

Relationship of above to insured **Son**

Purpose for which vehicle being used at time **Outing**

Was vehicle in care of a garage, dealer or service station? **NO**

If so, give details _____

Place of theft: Street **Belfield R.S.L CLUB** Town **Sydney**

The fire/theft was reported to Police Officer _____ of **Compsie** Police Station _____

COMPLETE THIS SECTION FOR THEFT CLAIMS ONLY

Full description of theft: On the **27** day of **September** 19**80** at **12:30 a.m./p.m.** I came out of **Belfield R.S.L Club** to find the car missing, so my next action was to call the Police at **Compsie** police station they took the appropriate action.

What was the approximate mileage or kilometre reading at the time of the theft? **About 55 sec**

Note: If the vehicle has not been recovered at the time of completing this claim form, sign and have witnessed the declaration below. It is not necessary to complete the remainder of the form at this stage.

PLEASE DO NOT DETACH THE SECOND PAGE. RETURN BOTH SECTIONS.

I/We do solemnly and sincerely declare—

- That there was no insurance other than that stated above, current on or extending to the said vehicle, or part of it at the time of the said theft.
- That the information supplied on this claim form is true in every respect. And I/we make this Declaration conscientiously believing the same to be true.

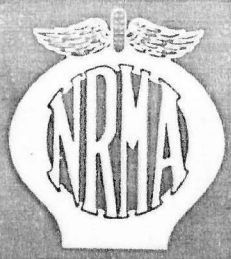
Witness **P. Robertson (NRMA)** Signature **NP59** Date **2-10-80**

(Signature required)

P. NIXON

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N.R.M.A. Insurance Limited



CLAIM NUMBER PB25669	CODE 3	SUB-CODE R
Excess \$ 100	A.E. \$ 2999 T/L	

IF VEHICLE RECOVERED BY POLICE ADVISE:

Name of Police Officer _____ Police Station _____ Date recovered **30-9-8**

Has the Vehicle been damaged?

If answer "Yes," advise where vehicle can be inspected during business hours.

YES NO

Paole RD Kellyville (Golden fleece service station out in back)

Please indicate damaged areas on sketch below.

Was the vehicle towed?

If answer "Yes," by whom?

YES NO

Have you obtained an estimate for repairs?

If answer "Yes," from whom?

YES NO

(Please attach all quotations)

COMPLETE THIS SECTION FOR FIRE CLAIMS ONLY

Full description of Fire: On the **30** day of **September 1980** at **7:00 a.m./p.m.** **The police bring me and told me the car was found burned out. They told me to go and take the number plates off. So I went up to Kellyville and seen the car it was burned out.**

