ACCIDENT/THEFT REPORT FORM

(Attach copies of Valid Driving License, Registration Certificate, Insurance Policy and FIR (if applicable))

Fax this form with the above mentioned documents to 91 22 6196 4196 or alternatively e-mail scanned form and documents to service@arval.in

Vehicle User/Client Details

Vehicle User Name: .....Designation:.....

Client/Company Name:.....

Address:.....

.....PIN: .....

Ph No: .....Mobile No:.....E-mail:.....

Vehicle Details

Reg. Number: .....Make & Model:.....Current KM:.....

Engine Number: .....Chassis Number:.....

Insurance Policy Details

Insurance Company Name: ..... Policy No:.....

Policy End Date: .....

Driver Details (As Mentioned In Driving License)

Name:.....Address:.....

.....PIN:.....

Date of Birth: .....License Number:.....

Place and Date of Issue:..... License Expiry Date:.....

Accident Details

Accident date: ..... Time:..... Location:.....

Narration of Accident:.....

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Purpose of the vehicle being used at the time of accident: .....

Vehicle was towed away: Yes/No Police Involved: Yes/No

Details of Police Station:..... Phone No:.....

FIR Details (if applicable): .....

(FIR should be lodged with police, in case of third party injury or damage to third party property. FIR copy should be attached along with a separate sheet giving complete third party driver, Vehicle & Insurance Details)

We declare that the above information is accurate and correct to the best of our knowledge and we will be liable for any losses, in case any of the information provided above is found to be incorrect

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Name & Signature of the User/Client Name & Signature of the Arval Authorised Signatory

Please don't leave any valuables behind in the vehicle. Please remove all removable accessories from the vehicle before handing it over to the workshop (e.g., stereo system face); Arval India shall not be responsible for loss of any valuables.