

Your policy requires that your loss be reported to the Garda. Please complete Section A fully. Section B must be completed by the Garda located in the District in which the incident occurred. This document should be returned with your completed Claim Form to Chartis.

### Section A Notification to An Garda Siochana

**1** Name of Insured

**2** Address

**3** Policy number

VAT Registered  
Yes  No

**4** Approximate Value of Lost/Stolen Property

€

**5** Lost/Stolen from Address/Scene

Date

**6** Description of Lost/Stolen Property

**7** If Motor Car Involved

Reg. No:	Year:
Make:	CC:
Chassis No:	Engine No:
Colour:	Model:
	Mileage at Date of Loss:

**8** Are you sole owner of vehicle

Yes  No

Vehicle Registered to (Name)

**9** If Bicycle/Plant/Other Equipment Involved

Name of Manufacturer:

Serial/Engine No:

Year Manufactured:

Signed  Dated

### Section B Certificate for completion by An Garda Siochana

Area	Division	District
To: Chartis Insurance Ireland Limited		
This is to Certify that _____ of _____		
	(Name)	(Address)
reported the loss/larceny of _____ on _____		
	(Property)	(Address)
Signed _____		
(Garda)		
Block Capitals _____		
Dated _____		
The Interest of Chartis Insurance Ireland Limited has been noted.		<b>STAMP</b>
Detach underneath Copy and hand to Garda		

Chartis Insurance Ireland Limited is classified as a "Data Controller" under Irish Data Protection Legislation. The information you provide to us as part of your claim application will be processed by us to confirm your identity, process your application and to record and cross reference particulars of your claim in insurance industry databases for fraud prevention purposes. In certain cases, this may involve the sharing of your information with other insurance providers and private investigators. Guidelines for sharing of information in this regard are contained in a Code of Practice on Data Protection for the Insurance Sector which has been approved by the Data Protection Commissioner.