What to do in the event of a claim?



Go to www.vero.com.au/claims

Or, if you require an urgent response call 1300 888 073



At critical times, when you need to make a claim, there are many things on your mind. We are here to make the process easier for you, so that you can get back on the road sooner.

Regardless of the type of claim you simply go to www.vero.com.au/claims or call 1300 888 073 at any time of day or night.

We will need you to give us:

- your policy number/name
- vour contact details
- date, time and location of the loss/event
- description of the loss/event
- any third party contact details including, name, phone number, drivers license number and address (check each side of drivers licence and take a photo)
- Details of any witnesses, and
- police report number (if applicable)

What to do in the event of a claim?

- 1. At the scene of the accident, collect the details of the other vehicle if applicable. Take photos of the damage to each vehicle and the number plate(s) of the other vehicle(s) involved in the accident. Refer to the reverse of this page for a reference sheet. This reference sheet lists the information you should collect for each of the vehicles involved in the accident. By placing this sheet in your glove box, you will have help at hand when you need it.
- 2. Go to <u>www.vero.com.au/claims</u> or call us on 1300 888 073 to make a claim. We will help you 24 hours a day, 7 days a week.

After you lodge your claim

Lodging Vero's commercial motor claims are quick, easy and reliable. Repairs are conducted by leading service providers, located across Australia, which offer many benefits such as:

- No quotes required. Vero can simply book your repairs for an agreed date and time with one of our Approved Repair Partners
- Complimentary taxi or Uber offered to and from our Approved Repair Partners to your next destination
- Quick turnaround time and lower claims costs
- All Approved Repair Partners are I-CAR Gold certified
- Lifetime guarantee on all vehicle repairs authorised by Vero

Place in your glove box

Please use this form to assist you in recording the accident details, then go to $\underline{www.vero.com.au/claims}$ to lodge your claim.

Please take photos of the incident and third party details e.g. their drivers licence and involved vehicles including number plates.

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(a) Policy Number*		Name*		
(b) Date of accident* / / Address of incident*			Time of loss*	:
Description of incident				
(c) Insured vehicle* Make of vehicle	Model of vehicle		Registration numb	er of vehicle
Is your vehicle drivable: No Yes	If no, current vehic	cle location:		
(d) Name of driver				
Address				
			State	Postcode
Driver's license number	Expiry date	State		
	/ /			
Mobile/home	Work phone			
Name of car owner (if different)				
Traine of car owner (ii different)				
Address				
			State	Postcode
Mobile/home	Work phone			
(e) Third party vehicle				
Is Third Party vehicle drivable: No	Yes U			
Make of vehicle Model of	of vehicle		Registration number o	† venicle
Driver's name		Address		
Driver's name		Address		
			State	Postcode
Are they the owner of the vehicle No Driver's license number	Yes U Expiry date	State	State	rosicode
	/ /			
Mobile /home	Work phone		 Insurer name	
Insurance company			J [
(f) Name of witness (person who sees the	incident but is not inv	olved)		
Address			0	
Mobile/home	Work phone		State Work phone	Postcode
	7 TOTAL PRIORIO		TTOTA PROTECT	
() B !!	J [
(g) Police report details(h) Please attach a sketch of the accident.			Police number	