

THEFT	Anti-Theft / Vehicle Recovery Device Details	Make	
		Fitted By	
		Date	
	PLEASE ATTACH PROOF OF DEVICE		
	Details of Window Markings	Number	
		Applied By	
	Details of Scratches, Dents, Defects on vehicle		
Details of other features which would assist identification			
PLEASE ATTACH THE VEHICLES KEYS, A COPY OF THE REGISTRATION CERTIFICATE AND THE LAST SERVICE INVOICE			
DECLARATION	I/We hereby declare the foregoing particulars to be true and complete in every respect.		
	_____	_____	_____
	Signature of Insured	Capacity	Date