

Third-Party Vehicle Insurance Claim Form (Sample Example)

For a smooth insurance process, understanding the **third-party vehicle insurance claim form** is essential. This sample example helps policyholders accurately report damages and incidents involving a third party. Filling out the form correctly ensures timely claim settlement and legal compliance.

Policyholder Information

Full Name:

Policy Number:

Contact Number:

Email Address:

Incident Details

Date of Incident:

Time of Incident:

Location:

Description of Incident:

Third-Party Details

Name:

Contact Number:

Vehicle Details (Make/Model/Reg No.):

Third-Party Insurance Details:

Damage Details

Describe the Damage:

Upload Photographs (if any):

Choose File

No file selected

Additional Information

Police Report Number (if applicable):

Witness Details (if any):

Declaration

Declaration

I declare that the information provided above is true and accurate to the best of my knowledge. I understand that providing false information may lead to the rejection of my claim.

Signature: Date:

Submit Claim