Motor Vehicle



Accidental Windscreen or Window Damage Claim Form

COMPLAINTS AND DISPUTES

Enthusiast and Assetinsure support the aims and application of the General Insurance Code of Practice (GICOP) and the Motor Vehicle Insurance and Repair Industry Code of Conduct that sets the standards of practice and service for the insurance industry.

If you have a concern or complaint about our products or services, then please let us know by contacting the person at Enthusiast with whom you were dealing to see if they can resolve the matter to your satisfaction. You can contact Enthusiast on 1800 10 10 44. We will try to resolve the complaint to your satisfaction as quickly as possible.

If you are not satisfied with the response:

- for claim related complaints or disputes, you may contact our National Manager, Claims at Assetinsure, on (02) 9251 8055 or complaints@assetinsure.com.au, who can provide advice and assistance in resolving your claim-related complaint or dispute; and
- for other complaints, you may contact the Compliance Officer of Assetinsure Pty Ltd using the same contact details.

Australian Financial Complaints Authority (AFCA)

If a matter has not been resolved to your satisfaction within 30 days, you have the right to refer the matter to the AFCA. AFCA is an external dispute resolution body that provides a free and independent dispute resolution service for retail clients. You can contact AFCA using the following contact details.

Post to: GPO Box 3, Melbourne VIC 3001

- Call: 1800 931 678 (free call)
- Email: info@afca.org.au
- Website: www.afca.org.au

Privacy Statement

This Privacy Statement describes how we collect, use, handle and disclose your personal information. It also describes the matters to which you give your consent when applying for a Policy.

Any personal information we collect will be handled in accordance with our Privacy Policy (available at www.assetinsure.com.au/privacypolicy/) and the Privacy Act 1988 (Cth) (the Privacy Act). Our Privacy Policy includes information about your right to access and seek correction of the personal information we hold about you and how you may do this, how you can make a complaint about a breach of your privacy rights and how we deal with complaints.

Collection and use of your personal information

We usually collect personal information directly from you. In some circumstances, we may collect your personal information from another person or source – we usually only do this when it is unreasonable or impracticable for Assetinsure Pty Ltd to collect it directly from you or when you would expect us to collect the information from a nominated third party. For example, when you authorise a representative (e.g. an insurance broker, financial planner, legal services provider, agent or carer providing services) to deal with us on your behalf, we will seek the information directly from them.

You agree that your personal information may be collected, held and used by us for the purpose of providing our services to you, including offering and assessing an application for a Policy and providing, managing and/or administering any Policy subsequently provided to you.

In addition, you agree that your personal information may be collected, held and used for the purposes of corresponding with you, managing any claims you make and services we provide you, executing your instructions, managing our relationship with you, complying with legislative and regulatory requirements, collecting payments, responding to your enquiries, marketing our services and understanding services you may be interested in receiving (we may do this by calling you or sending you direct mail, such as by email to your email address), for internal purposes (including risk management, underwriting and pricing, quality assurance and training purposes) and for other purposes identified at the time of collecting your information.

Consequences if information is not provided

If you do not provide us with the information we need, we will be unable to consider your application for insurance, administer your Policy or manage any claim under your Policy.

Disclosure of your personal information

You agree that we may disclose your personal information:

- to Enthusiast;
- to our external service providers and contractors (such as any mail house, commercial agent or entities engaged by us to carry out certain business activities on our behalf, such as loss assessors, claims investigators, insurance reference bureau, underwriters and reinsurers, lead generators, data analysts, claims reference providers, hospitals, medical and health professionals, and information technology service providers);
- to our related entities, assignees, agents and external advisers (such as legal and other professional advisers);
- to any other person we consider necessary to execute your instructions;
- to any financial institution to or from which a payment is made in relation to any Policy you have; or
- in accordance with any consent you give or where disclosure is authorised or compelled by law (for example, to law enforcement and regulatory, government and dispute resolution bodies).



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Transfer of personal information overseas

You agree that we may disclose your information to recipients located overseas, including the USA, Canada, Bermuda, Europe (including the United Kingdom), Singapore, South Africa, Hong Kong and India.

Information about another person

If you provide information about any other person, you agree to tell them that you are providing this information to us, about our contact details in this document, the reason you are providing their information, the fact that we have collected personal information from you and about the contents of this Privacy Statement.

General Insurance Code of Practice

Assetinsure Pty Ltd subscribes to the General Insurance Code of Practice (GICOP). The GICOP was developed with the Insurance Council of Australia to further raise standards of practice and service areas across the insurance industry.

The Code Governance Committee (CGC) is an independent body that monitors and enforces insurers' compliance with the GICOP.

You can obtain more information on the GICOP and how it can assist you by contacting us on (02) 9251 8055.

For more information on the GICOP and CGC, visit www.codeofpactice.com.au.

Enthusiast Claims

Phone: 1800 10 10 45 or (02) 8274 2897

- Post: PO Box R299, Sydney NSW 1225
- Email: claims@enthusiast.com.au

Enthusiast Underwriting Pty Ltd ABN 35 142 206 746



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For prompt claims service, this form must be returned to Enthusiast Underwriting Pty Ltd, with all questions answered. Please print your answers and \checkmark where appropriate. This form is issued to enable the insured to lodge a written statement of claim. It does not constitute an admission of liability on behalf of Enthusiast Underwriting Pty Ltd or Assetinsure Pty Ltd.

Claim Number - OFFICE USE ONLY

1. Policy holder details

Name / business name								
Policy number _ E		E	ENT					
Policy period from	/	/ 20	to	/	/ 20			
Address								
Suburb				State			Postcode	
Phone (home)				Phone	(work)			
Phone (mobile)				Fax				
Email								
Occupation								

2. Person to be contacted

Name		
Address		
Suburb	State	Postcode
Phone (work)	Phone (mobile)	
Fax	Email	







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3. Insured vehicle and claim details

Vehicle details				
Name of registered owner				
Registration number	Year of manufacture			
Make	Model			
Body type				
Colour	VIN			
Was there any other damage to the vehicle?	-	Yes	No	
If yes, please describe.				
What was the date of the loss or breakage?	/ /			
Was the windscreen or glass broken by a rock?		Yes	No	
If not a rock, what was the cause?				
For what purpose was the vehicle being used at the time				
	ninated annual distance driven			
Laid up/restoration Recreational			unt	
	 If yes, please forward a copy of the receiption If no. complete EFTPOS details below. 	pi/ acco	unit.	
If yes, do you require a cheque to be sent to you? Yes N If the windscreen has been replaced, please forward a copy of th				
4. Goods and Services Tax				
(To ensure you do not incur any unnecessary GST liabilities on th	s claim, complete these details.)			
Are you registered for GST purposes?		Yes	No	
If yes, what is your ABN?				
Have you claimed or are you entitled to claim an Input Ta GST applicable to the policy premium?	x Credit for the	Yes	No	
Please specify your percentage entitlement.			%	







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5. Electronic Funds Transfer (Settlement of your claim may involve a cash settlement. Please complete the following if you require an EFT payment.)

Account name			
Name of bank			
BSB	Account number		
6. Driver history (if no	ot the insured)		
Have you had any losses in the past 5 years?	or previously made a claim against any insurance company	Yes	No
If yes, please give details.			
Have you had any insura had special conditions in	nce or renewal of insurance refused, cancelled or	Yes	No
If yes, please give details.		100	110
Have vou been charged v	with or convicted of any criminal offence?	Yes	No
If yes, please give details.			
If yes, please give details. Have you been charged v	with or convicted of any motoring offences (other than n disqualified from driving in the past 5 years?	Yes	No







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IMPORTANT DECLARATION - (PLEASE READ BEFORE SIGNING)

On behalf of the insured, I declare the above answers to be true and correct in every particular and acknowledge that Enthusiast Underwriting Pty Ltd and Assetinsure Pty Ltd may make their decision on indemnity having regard to these answers.

I consent to Enthusiast Underwriting Pty Ltd and Assetinsure Pty Ltd using the personal information which I have provided on this form for the purposes of processing this claim. I understand that if I choose not to provide the required details, Enthusiast Underwriting Pty Ltd and Assetinsure Pty Ltd may not be able to process this claim.

I consent to Enthusiast Underwriting Pty Ltd and Assetinsure Pty Ltd disclosing my personal information to other insurers, an insurance reference service or as required by law. I also consent to Enthusiast Underwriting Pty Ltd and Assetinsure Pty Ltd disclosing my personal information to, and/or collecting information about me from, third parties such as investigators or legal advisers. Where I have provided information about another individual (for example an employee or client), I declare that the individual has or will be made aware of that fact.

If you accept this statement tick the box and complete the fields below.

I accept the above statement

Name

Date / /20

On behalf of

the insured

