

<b>Policyholder</b>	Name		Personal identity code				
	Street address		Postal code	City			
	E-mail address			Telephone (pref. mobile)			
<b>Vehicle</b>	Make and model			Registration number			
<b>Bank connection</b>	IBAN		BIC				
<b>Date and place</b>	Date and time of loss	Day of week		City			
	Exact location (If the entire vehicle was stolen, please draw a detailed picture of the place of loss on the reverse side of this form.)						
<b>Theft/Illicit use</b>	Were the vehicle doors locked?	Was the boot lid locked?	Did the vehicle have a steering lock?	Were the windows closed?	Was the sunroof closed?		
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	Did the vehicle have an electronic immobiliser?		Did the vehicle have a gear, steering wheel or pedal lock or some other mechanical anti-theft device?				
	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No				
	Theft alarm?			Make and model			
	<input type="checkbox"/> Yes, in operation <input type="checkbox"/> Yes, but not in operation <input type="checkbox"/> No						
	Who parked the vehicle and when? If another person was present, the name and address must be included.						
How was the vehicle entered?			When and by whom was the loss discovered?				
Where were the keys kept?							
How was the vehicle damaged in connection with the loss?							
<b>Condition of the vehicle</b>  (if the vehicle has not been found within 30 days)	Kilometre readout of the vehicle?						
	Conditio	Recently renewed	Bills attached	Very good	Good	Satisfactory	Poor
	Paint	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Motor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Gears	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Axles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Body	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Interior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Did the vehicle have previous body, paint or corrosive damage?							
<input type="checkbox"/> No <input type="checkbox"/> Yes, describe quality and location of the damage							
Miles on the tyres							
<input type="checkbox"/> less than 10.000 <input type="checkbox"/> 10.000-30.000 km <input type="checkbox"/> other, specify							
<b>Equipment stolen from the vehicle</b>	Stolen item (the original purchase receipt or guarantee certificate must be appended or an explanation why the receipt is not available)						
	Make and modell	Year of purchase	Purchase price	Explain for missing receipt etc.			
<b>Signature</b>	Fill properly to ensure quick and thorough processing. Forms with missing information will be returned to be supplemented. By signing this document you certify the information to be correct.						
	Place, date and policyholder's signature						
Insurance companies have a joint non-life insurance information system from which your claims filed with different companies can be verified in connection with claims dandling (Data Protection Board Decision No. 1 of 5 March 2001.)							

## **INSTRUCTIONS**

Use this form to make a report if your vehicle has been stolen or broken into. Damage to vehicles must as a rule be inspected, either at a repair shop or inspection station.

In addition to the loss report, we need the following documents

- copy of report to police
- purchase receipts or guarantee certificates of any music players
- purchase receipts or guarantee certificates of household contents and company property if the property has been insured at A-Vakuutus or Pohjola

### **Send the report to the following address**

A-Vakuutus / Autovahinko  
P.O Box 551  
00013 Pohjola