

Hired Vehicle Damage Coverage Claim Form

Personal Information

Full Name:

Contact Number:

Email Address:

Vehicle Information

Vehicle Make:

Vehicle Model:

License Plate Number:

Rental Company:

Accident/Damage Details

Date of Incident:

Location of Incident:

Description of Damage:

Police Report Number (if any):

Supporting Documents

Attach Photos or Documents:

Choose File

No file selected

Submit Claim