

CUSTODIAN AND ALLIED INSURANCE LTD

Head Office: 16a, Commercial Avenue, Sabo Yaba, Lagos.
P.O. Box 56487, Ikoyi, Lagos. Tel: 2694226, 2694720,
2707204-8 Fax: 2692138 ,2694972,
Branches: Block 1, Plot 516, Sultan Abubakar Way.
Zone 2 Wuse, Abuja. Tel: 09-5237209, 09-5239216

CLAIM No......

Name of Insured			
Address			
Policy Number		Telephone Number	
D.O.B.		E-mail address	
Place of Birth		Gender	
Occupation		Mother's Maiden Name	
Next of Kin's Name		Next of Kin's Phone Number	

Vehicle Make/Year	Reg. Number	Chassis Number	What category of license	For what purpose was the vehicle being used?

If vehicle is not owned by Insured, state name and address of: _____

(a) Owner _____

(b) Insurer _____

Name, age and address of person driving at the time of accident
 Name..... Age
 Address.....
 Does he/she hold a license?..... What is its category?..... When does it Expire?
 How long has he/she been driving (a) this type of vehicle?..... (b) any other type of vehicle?
 State whether the person driving at the time of the accident is:
 (a) The Owner..... (b) His Employee..... Or (c) Relative or Friend?
 If employee, how long has been in the employment?
 If owner was not driving, state whether the person driving at the time of accident owns a vehicle himself
 If so, state Name and addresses of Insurers

Date	Time	am/pm
Was the vehicle in use with Insured's permission or authority		
Exact location of accident		
Road conditions?	weather	
Estimated speed of insured vehicle	m.p.h.	Was horn sounded or other warning given?

Full description of accident (please continue on a separate sheet if necessary)

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SKETCH – Please show position of vehicles and person concerned at the time of accident, indicate by arrow the directions in which they were traveling

[illegible]

WITNESSES

Give names and addresses of all witnesses

Passengers in Insured’s vehicle

Other Witnesses

Employees

Names and Address of conductors, apprentices and employees in vehicle

If no names of witnesses taken, please state reason

Did Police Official witness accident or take particulars? Official’s no
If not, to which Police or other Authority has accident been reported?

DAMAGE TO INSURED VEHICLE
State full details of damage parts

Where can the vehicle be inspected?

Estimated cost of repair

Repairer’s Name, Address, and Telephone No

WHERE THE POLICY PROVIDES INSURANCE FOR DAMAGE TO THE VEHICLE, A DETAILED ESTIMATE SHOULD BE SUBMITTED AS SOON AS POSSIBLE, BUT THE REPAIRS SHOULD NOT BE PUT IN HAND WITHOUT THE APPROVAL OF THE COMPANY UNLESS WITHIN THE LIMIT PERMITTED BY THE POLICY

THRID PARTIES INVOLVED IN THE ACCIDENT
State names and addresses of any passengers and/ or other persons sustaining injury and give nature of injury and stating exactly where they were at the time of the accident

Give the names and addresses of Owner and registered number of any vehicle concerned

Give particulars of any damage sustained by such vehicle, or any property not belonging to yourself

If notice of Third Party claim has been given, verbally or in writing give particulars

Where can the vehicle be inspected?

IF ANY WRITTEN COMMUNICATION IS RECEIVED, PLEASE FORWARD IT IMMEDIATELY UNANSWERED

I,declare the foregoing particulars to be true in every respect, and I hereby leave in the hands of the Company in accordance with the Conditions of the Policy the conduct of all claims and litigation arising out of this accident and to which the Policy applies, to deal with, to prosecute and /or settle as they think fit without further reference to me; and I undertake to give all such information and assistance as the company may require.

Date.....

Signature.....

Akure:
3rd Floor, Right Wing,
Bank Of Industry House, Akure,
Ondo State.
Tel: 022-911252, 08055394748

Kaduna:
3, Kanta Road,
Turaki Ali House,
Kaduna State.
Tel: 062-293346

Benin:
4th Floor, West Wing, 34,
Akpakpava Road, Benin
City, Benin State.
Tel: 05-2292480, 07066908842

Ikorodu:
294, Lagos Road,
Ikorodu, Lagos State.
Tel: 09039358400

Owerri:
37, Ekwena Crescent,
Ikwe Negbu Layout Owerri
Tel: 083-431158

Kano:
Suite 13, 15 Bank Road,
Kano State.
Tel: 064-895969,
064-431812

Apapa:
Atlantic House,
23/27, Wharf Road,
Apapa, Lagos State.
Tel: 08033909844, 09039134310

Ibadan:
6th Floor, Broking House,
1 Albaji Jimoh Odutola Road,
Dugbe, Ibadan, Oyo State Tel:
022-918538

Port Harcourt:
222, Aba Road,
Port-harcourt City
Tel: 07085000046

Calabar:
2nd Floor, Right Wing Office Suite,45
Murtala Mohammed Highway,
Calabar, Cross River State.
Tel. 09024894449,09095263143

Osogbo:
37b, Gbogan, Ibadan Road,
Opp. Fakunle Comprehensive High Sch.,
Osogbo, Osun State.
Tel: 08055394748, 08133587587

Abuja:
Plot 1012,
Adetokunbo Ademola Crescent,
Wuse II, Abuja.
Tel: 09-7817420, 09-2900465

Abeokuta:
36, Totoro Road,
Abeokuta, Ogun State
Tel. 08023860547,
08166904601

Asaba:
3&4 Empire House 339,
Road, Asaba,
Delta State. Tel: 07089411057

Onitsha:
60a, Old Market Road,
Onitsha, Anambra State.
Tel: 08064445956,09032537339

Amuwo-Odofin:
Plot 129, Block 10,
Amuwo-odofin Residential Scheme
Tel: 07064650852

Ikeja:
95, Adeniyi Jones Avenue,
Ikeja, Lagos State.
Tel: 09033484553

Sabo-Yaba:
27a, Commercial Avenue,
Sabo-Yaba, Lagos.
Tel: 09069149532

Tejuosho:
H4016, Main Tejuosho Shopping Complex,Nnebisi
Ojuelegba Road, Lagos.
Tel: 08033306048