

Turners use only	Date Received _____
	Turners Auth. _____

Name _____ Phone No. _____ Email _____
Address _____

Are you the registered owner of the vehicle?

Name _____ Phone No. _____ Email _____
Address _____

Vehicle Details

Make _____ Model _____ Year _____
Registration _____ Current Odometer Reading _____ kms / miles
Last Service Date _____ Last Service Odo Reading _____
WoF Expiry Date _____ Registration Expiry Date _____
Describe in brief the normal use of the vehicle _____

Purchase Details

Branch purchased from _____ Invoice No. _____
Buyer Account No. _____ Purchase Date _____

Details of the Problem or Issue

When was the problem first noticed? Day _____ Date _____ Time _____
Describe what happened? _____
(Attach a separate sheet of paper if more space is required) _____
What was the vehicle being used for? _____
What actions have you taken before now? _____
(If this has been assessed please give details of the assessor and their assessment) _____

Declaration

The information provided above is entirely true and correct and I have not withheld any information relevant to this claim. Where any information I have provided is incorrect or has been withheld Turners and its Vendors may reduce my claim or treat it as void from the outset.

Signature of Driver _____ Date _____
Signature of Owner _____ Date _____