

NOTIFY OF INSURANCE CLAIM FORM / BORANG NOTIFIKASI TUNTUTAN INSURAN
CUSTOMER INFORMATION / MAKLUMAT PELANGGAN

Name / Nama:	:		
NRIC No. / No. Kad Pengenalan:	:	Tel No./ No. Telefon:	:
Occupation/ Pekerjaan:	:	E-mail Address/ Alamat E-mel :	:
Age / Umur:	:	Gender / Jantina :	:
Address/ Alamat:	:		

MOTORCYCLE INFORMATION / MAKLUMAT MOTORSIKAL

Vehicle Registration No. / No. Plat	:	Time of Incident/ Masa Kejadian:	:
Date of Loss/ Tarikh Kehilangan :	:		
Place of Incident / Tempat Kejadian	:		

DECLARATION / PERISYTIHARAN

I hereby warrant that the above statements are true and correct and that I have not withheld any material information in connection with this claim from Parkson Credit Sdn. Bhd./ *Saya akui bahawa semua pernyataan diatas dengan tuntutan ini adalah benar dan saya tidak menyembunyikan apa-apa maklumat penting yang berkaitan daripada Parkson Credit Sdn. Bhd.*

(Customer Signature/ *Tandatangan Pelanggan*)

Customer Name / **Nama Pelanggan:** _____
 Date / **Tarikh :** _____

Note/ Nota :

Kindly submit the completed Notify of Insurance Claim form together with a copy of the police report via the **Service Button** at www.parksoncredit.com.my/customer_service.php at the **Notify of Insurance Claim** tab / *Sila hantar Borang Notifikasi Tuntutan yang lengkap bersama dengan laporan polis melalui Butang Khidmat di www.parksoncredit.com.my/customer_service.php di tab Notifikasi Tuntutan Insuran*

For Office Use/ Untuk Kegunaan Pejabat

Received by/ **Diterima Oleh:** _____ Verified by/ **Disahkan Oleh:** _____

Name/ **Nama :** _____ Name/ **Nama :** _____
 Date/ **Tarikh:** _____ Date/ **Tarikh:** _____