



Level 4, 142 Elizabeth Street
Hobart TAS 7000
 Ph (03) 6231 3360
 Fax (03) 6231 6053

Steadfast Taswide Pty Ltd
 ABN 24 092 613 664
 AFS Licence No. 238451

12 Don Road
Devonport TAS 7310
 Ph (03) 6424 8886
 Fax (03) 6423 4005

enquiries@stib.com.au
 www.steadfasttaswide.com.au

1st Floor, 75 Wilson Street
Burnie TAS 7320
 Ph (03) 6431 1888
 Fax (03) 6431 3444

85 Elphin Road
Launceston TAS 7250
 Ph (03) 6334 6111
 Fax (03) 6334 8811

Broken Windscreens Only

The supply or acceptance of this form is not an admission of liability on the part of the insurer.

Comprehensive Policy Number From To

Insured's Name Insured's Age
 Email

Street Address Postcode

Insured's Phone Insured's Email

Driver's Name Driver's Age

Driver's Licence Expiry Date

Make of Vehicle Model Year

Engine Number Rego Date of Breakage

Was the broken windscreen treated? (Please check all that apply)

Tinted Zone Toughened Laminated

Amour Plate Banded Other

Was the windscreen struck by a stone? Yes No If not, state cause

To ensure you do not incur any unnecessary GST liabilities on this claim please complete the following:

Australian Business Number (ABN) if applicable - - -

Entitlement to input tax credit on respect of the insurance premium % and the vehicle %

On receipt of the account for replacement please pay the repairer direct OR forward cheque to me/us.
If the windscreen has already been replaced please attach your account receipt.

If these questions do not cover all the facts of the accident please attach supporting documentation.
I declare that the above is a true statement of the facts and all matters relating to this claim.

Insured's Signature Date

Privacy Statement The Privacy Act 1988 requires us to tell you that we as broke and the insurer collect your personal and sensitive information in order to calculate your loss and entitlements, determine the insurer's liability, compile data and handle claims. When handling claims we and the insurer may have to disclose your personal and other information to third parties such as other insurers, reinsurers, loss adjusters, external claims data collectors, investigators and agents, or other parties as required by law. Where you give us information about other persons you must have their consent to this and provide it on their behalf. If not, you must tell us. You have the right to seek access to your personal information and to correct it at any time. Please contact us to advise if any changes are required.