

GARDA NOTIFICATION FORM

Your policy requires that your loss be reported to the Garda. Please complete Section A fully Section B must be completed by the Garda located in the District in which the incident occurred. This document should be returned with your completed Claim Form to Bolttech Device Protection (Ireland) Ltd. (hereafter "Bolttech") that is acting as your authorised policy administrator on behalf of AIG Europe S.A.

SectionA Notification to An Garda Siochana

1	Name of Insured	
2	Address	
	Telephone	E-mail
3	Policy	VAT Registered Yes <input type="checkbox"/> No <input type="checkbox"/>
4	Approximate Value of Lost/Stolen Property	
5	Lost/Stolen from Address/Scene	Date
6	Stolen Property: Make and Model, IMEI or Serial	

7	EventDescription
Signed	Dated

Bolttech is acting as your authorised policy administrator on behalf of AIG Europe S.A. AIG Europe S.A. is classified as a "Data Controller" under Irish Data Protection Legislation. By providing your Personal Information or Personal Information regarding other individuals to Bolttech on behalf of AIG you represent that you have the authority to do so and consent to the collection and processing (including the disclosure and international transfer) of this Personal Information as stated in the Privacy Policy which is available at www.aig.ie, by e-mailing postmaster.ie@aig.com or by writing to the Data Protection Officer at AIG Europe S.A., Ireland Branch, 30 North Wall Quay, International Financial Services Centre, Dublin 1.

SectionB Certificate for completion by An Garda Siochana

Area	Division	District
To: AIG Europe S.A. This is to Certify that _____ of _____ (Name) (Address)		
reported the loss/larceny of _____ on _____ (Property) (Address)		
Signed _____ (Garda)		
Block Capitals _____		
Dated _____		
The Interest of AIG Europe S.A. has been noted.		STAM
Detach underneath Copy and hand to Garda		