Bolttech Device Protection (Ireland) Ltd BlockC, 77 Sir John Rogersons Quay Dublin 2 D02 VK60
E-Mail:
support.eirmobileinsurance@bolttech.ie

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.

SectionA Notification to An Garda Siochana

1 Name of Insured

2 Address

Telephone E-mail

3 Policy

VAT Registered
Yes ☐ No ☐

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

SectionB Certificate for completion by An Garda Siochana

Area Division District

This is to Certify that _____ (Name) of _____ (Address)

reported the loss/larceny of _____ (Property) on _____ (Address)

Signed _____ (Garda)

Block Capitals _____

Dated _____

STAM

Detach underneath Copy and hand to Garda

V1.3