

Dear Insured:

RE: AVIVA Automobile replacement cost insurance - No. 12000617 Standard total loss claim reporting instructions

Please complete the attached Total Loss Claim Report form as thoroughly and legibly as possible. Please sign and date it, and forward to us along with the required documentation listed on the instructions page. This will enable us to reach a claim settlement with you as quickly as possible.

If you have not yet received payment from your primary insurer, provide at least 1 through 5 of the required documents and the rest can follow when they become available.

Documentation can be sent by fax to 1-888-810-5704 or by email to <u>claims@colwoodinsurance.ca</u>.

You are welcome to contact us before finalizing your claim with the primary insurer, in the event that you are unsure of the adequacy of the settlement offer.

If your vehicle was insured as new and you will be replacing it with the same make and model, please note that the <u>Insurance Company's approval should be obtained prior to finalizing</u> <u>arrangements to purchase a new vehicle</u>.

You should also be aware that you have 90 days from the loss date in which to provide us details of your loss, and two years from the loss date in which to finalize your claim, or your claim may be proscribed or invalid.

Please do not hesitate to call if you have any questions.

Yours sincerely,

Colwood Insurance Services

Instructions for submitting a Standard total loss claim

Please forward your fully completed **Claim Report (SIGNED AND DATED**), along with **copies of the following**, to Colwood Insurance Services.

The information and documents you submit may need to be shared by Colwood Insurance with others in order to process your claim. These may include, but are not limited to, car dealers, your Primary Insurer, the Lessor of your vehicle and Aviva Insurance Company. If you are providing any information of a confidential nature, please let us know.

- 1. Your Aviva Automobile Replacement Cost Policy certificate page, plus any applicable endorsements
- 2. Bill of Sale (Motor Vehicle Purchase Agreement) or Lease Agreement (front and back of Lease, please) for the Insured vehicle.
- 3. For New Vehicles Only a full description of the Insured vehicle model, options, transmission, etc., from the selling dealer or leasing company. If possible, a factory invoice, build sheet or window sticker works best.
- 4. Your ICBC registration and insurance papers **for the period in which the accident occurred** (page 1 "Certificate of Insurance" and page 2 "Coverage, Fees & Premiums") plus, if you have private insurance for your collision/comprehensive coverage, a copy of your policy Declaration page.
- 5. For New Vehicles Only your dealer's proposed price for a new replacement vehicle, same make and model, and including the same equipment and options as the original vehicle. We suggest that you negotiate with the Sales Manager for the best price. If your vehicle model is no longer available, please refer to Section II paragraph (c) of your Insuring Agreement.
- 6. Police report, if available
- 7. *ICBC or other Primary Insurer's Valuation Report (you will probably need to specifically request this and should review it to ensure that all your vehicle's equipment and features have been taken into consideration in their settlement offer).
- 8. ICBC or other Primary Insurer's settlement cheque & cheque stub
- 9. Salvage release, if available

To avoid unnecessary delay in the processing of your claim, we urge you to submit items 1 through 5 first, and then forward copies of the remaining items as they become available or once you have settled with your Primary Insurer.

NOTE: IF YOUR VEHICLE IS LEASED, PLEASE BE SURE TO NOTIFY THE LESSOR IMMEDIATELY OF THE TOTAL LOSS OF YOUR VEHICLE, AND CHECK TO SEE IF GAP PROTECTION WILL APPLY.



Standard automobile total loss replacement cost claims report for:

Enter certificate number here:

Insured's information	
Name:	
Address:	
Email, if preferred	
Your or other contact person's	
name and phone No.	

Vehicle details				
Year:	Make:	Model:		
Serial No. (VIN):		Licence plate:		
Purchase price: \$		Date of purchase:		

Loss details	
Collision Theft	Other (describe):
Date of loss:	
Location of loss (city/province):	
Describe loss details:	
Report to police?	Police case #
Detachment:	

Primary physical damage insurer		
Insurer (ICBC or other?):	Claim #:	
Adjuster:	Phone #:	
Final settlement: \$		

<u>New vehicles only</u>: If I decide not to replace the vehicle, or not to get the same make/model, I understand that settlement will then be based on the lesser of the original purchase price or the replacement cost.

I hereby authorize my Primary Underlying Insurer, the insured vehicle's Lessor, my car dealer and my bank/finance company to release all claim information required by Aviva Insurance Company of Canada or its authorized representative, Colwood Insurance, for the purpose of determining my eligibility for the benefits claimed. I confirm that the information above is true and correct.

Signature of Insured: _____ Date: _____

Jan 2019 ** Subject to the terms, conditions, exclusions and definitions of the policy**