

Vehicle preshipment condition report



Form MN033 11/10

Lumley General Insurance (N.Z.) Limited, Head Office, Lumley Centre 88 Shortland Street PO Box 2426, Auckland 1140, New Zealand, Tel 09 308 1100, Fax 09 308 1939, www.lumley.co.nz

Broker details

Company:	Contact name:
Postal address:	Phone:

Owner details

Name:		
Address (in New Zealand):		
Phone:	Mobile:	Email:
Address (overseas):		
Phone:	Mobile:	Email:

Shipping details

1 Destination:	On vessel:	Shipping date: / /
2 Agent at destination:		

Vehicle details

1 Make of vehicle:	Model:	Type:
2 VIN no:	Engine no:	Reg no:
3 Condition of tyres (incl spare):		Condition of upholstery:
4 Specify any damaged glass:		
5 Battery disconnected	Yes <input type="checkbox"/> No <input type="checkbox"/>	Radiator drained
	Yes <input type="checkbox"/> No <input type="checkbox"/>	Petrol removed
6 Stereo	Yes <input type="checkbox"/> No <input type="checkbox"/>	If Yes, state brand:
	Yes <input type="checkbox"/> No <input type="checkbox"/>	Electric fan
7 CD	Yes <input type="checkbox"/> No <input type="checkbox"/>	If Yes, state brand:
	Yes <input type="checkbox"/> No <input type="checkbox"/>	Aerial
8 DVD	Yes <input type="checkbox"/> No <input type="checkbox"/>	If Yes, state brand:
	Yes <input type="checkbox"/> No <input type="checkbox"/>	GPS
9 Heater	Yes <input type="checkbox"/> No <input type="checkbox"/>	Clock
	Yes <input type="checkbox"/> No <input type="checkbox"/>	Gear shift grip
10 Lighter	Yes <input type="checkbox"/> No <input type="checkbox"/>	Ash trays
	Yes <input type="checkbox"/> No <input type="checkbox"/>	Keys
11 Windscreen wipers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Battery
	Yes <input type="checkbox"/> No <input type="checkbox"/>	Sunvisors (inside)
12 Sunvisors (outside)	Yes <input type="checkbox"/> No <input type="checkbox"/>	Floor mats
	Yes <input type="checkbox"/> No <input type="checkbox"/>	Front seats
13 Rear seats	Yes <input type="checkbox"/> No <input type="checkbox"/>	Seat covers
	Yes <input type="checkbox"/> No <input type="checkbox"/>	Spare tyre
14 Tools	Yes <input type="checkbox"/> No <input type="checkbox"/>	If Yes, state number:
	Yes <input type="checkbox"/> No <input type="checkbox"/>	Monsoon
15 Mirrors	Yes <input type="checkbox"/> No <input type="checkbox"/>	Hub caps
	Yes <input type="checkbox"/> No <input type="checkbox"/>	Spotlight
16 Odometer reading:		

Privacy Act 1993

Personal information is collected to evaluate your insurance requirements including establishing what cover, if any, is to be offered and its terms and premium. All information collected will be held by Lumley General Insurance (N.Z.) Ltd PO Box 2426 Auckland 1140 ('Lumley'). Individuals have the right under the Privacy Act 1993 to request access to and correction of their personal information.

Declaration

I/We declare that the information provided is in every way correct and complete and all material information has been disclosed.

Name of company completing this report:

Name of individual completing this report:

Signature:

Phone no:

Date: / /



Indicate on the appropriate diagram location/type/amount of damage.

Please use the following abbreviations:

B Bent

BR Broken

C Chafed

CH Chipped

D Dented

GC Glass cracked

HDC Heavy dust and mud covered minor defects, if any,
unable to determine

HS Hairline scratch

HSA Hairline scratches all over

LGC Locked glove compartment

LRT Locked rear trunk

M Missing

RM Rusty metal

S Scratched

SCA Scratched and chafed all over

SM Smashed

ST Stained

T Torn

W Wet by rain