

FLEXIRENT PROTECT - INCIDENT NOTIFICATION FORM

The issue of this form does not constitute an admission of liability on the part of Flexirent.

PART A - YOUR DETAILS

Agreement No:	
Customer Name:	
Claim Number:	
Address:	
Email Address:	
Fax No:	
Phone No:	
Preferred Contact Method:	

PART B - THE EQUIPMENT (if insufficient space, please attach details)

Description:	
Make & Model:	
Serial No:	

PART C - CLAIM DETAILS

Damage <input type="checkbox"/> (complete section C1)	Loss or Theft <input type="checkbox"/> (complete section C2)		
LOCATION OF DAMAGE, THEFT OR LOSS			
Home <input type="checkbox"/>	Transit <input type="checkbox"/>	Vehicle <input type="checkbox"/>	Office <input type="checkbox"/>
DATE AND TIME OF DAMAGE, THEFT OR LOSS		-- / -- / ----	-- : -- AM / PM
Location of premises/vehicle where equipment was damaged, lost or stolen:			
Is the premises / vehicle where equipment was located covered by any insurance?	Insurer		
	Insured's name		
	Policy Number		

PART C1 - DETAILS OF DAMAGE

Please explain fully how the damage occurred to the equipment:	

PART C2 - THEFT OR LOSS

How was entry gained to premises or vehicle:	
Police Report No.:	Date of Police Report:
Police Station (Name):	Police Station (Phone):
If stolen from vehicle, was it locked?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Was the vehicle the subject of violent or forcible entry?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Where in the vehicle was the equipment located at time of theft?	
If stolen from premises, was the building locked?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Is a copy of the Police Report attached?	YES <input type="checkbox"/> NO <input type="checkbox"/>

PART D - ADMINISTRATION CHARGE

What is your preferred payment method?	CREDIT CARD <input type="checkbox"/>	CHEQUE <input type="checkbox"/>
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Cheques to be made payable to "Flexirent Capital Pty Ltd" for \$220 (inc GST)



Credit Card Payment Authority

<input type="checkbox"/> Bankcard <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa

Note: American Express, Diners Club and other Credit Cards will not be accepted.

Card Number:

Expiry Date: ____ / ____ / ____ Amount: **\$220 (inc GST)**

	
Cardholder's Name (please print)	Signature of cardholder

DECLARATION

I/We state that I/we have not deliberately caused the said loss or damage or sought unjustly to benefit thereby by any fraud or wilful misrepresentation and that the information shown on this form is true and that I/we have not concealed any information relating to this claim.

	CUSTOMER SIGNATURE:	DATE: / /
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PLEASE CHECK THAT ALL RELEVANT SECTIONS OF THIS FORM HAVE BEEN ANSWERED.

**PLEASE RETURN INCIDENT NOTIFICATION FORM TOGETHER WITH ALL DOCUMENTATION TO:
Flexirent Capital Pty Ltd, PO Box 2345, St Leonards, Sydney, NSW, 1590
PHONE 1800 000 665 FAX 1300 135 504**

Guide to Claiming

Following your recent request an Incident Notification Form is enclosed.

Accidental Damage

Please ensure you complete the correct Incident Notification Form, based on the nature of the damage to your equipment:

- Accidental damage claims usually involve a broken piece of hardware, i.e. screen, hard disk, casing, motherboard etc. It is usual that the damage will occur as a result of a drop, the equipment being stepped on or impact from some other external force. (For this type of Claim complete the Flexirent Protect –Incident Notification Form)

What you need to do:

- The damaged unit can be taken to any repairer to supply a quote for repairing or replacing the equipment. (If convenient Flexirent would prefer you to contact the original supplier).
- All quotes and tax invoices should be made out to Flexirent Capital Pty Ltd, PO Box 2345, St Leonards, Sydney, NSW, 1590.
- Complete the incident notification form and ensure you provide full details of incident and remember to sign the form.
- A cheque for the Administration Charge must be attached to the form (the cheque is to be made payable to “Flexirent Capital Pty Ltd”) or alternatively if paying by credit card you may complete your credit details on the Incident Notification Form.
- Ensure the Incident Notification form, Administration Charge and a Quote to either repair or replace the item/s being claimed are all returned together. This will enable us to deliver a fast and efficient service to you. If this does not occur you will experience delays.
- The completed Incident Notification Form, Administration Charge and Quote can be submitted to:

Flexirent Capital Pty Ltd, PO Box 2345, St Leonards, Sydney, NSW, 1230

Or

Fax 1300 135 504

What we will do:

- On successful receipt of the Administration Charge, Flexicare will send you a Tax Invoice to cover this payment.
- As long as all the paperwork has been satisfactorily completed a response will be given within 3 working days.
- An email confirming Flexicare’s decision will be sent directly to the repairer. This will act as a purchase order. You will be notified of the decision according to your preferred contact method.
- Flexicare will pay the repairer directly within 7 business days of receiving their tax invoice.
- Flexicare may at its discretion, determine that it is cheaper or more effective to replace rather than repair the equipment. If this occurs, Flexicare will arrange for a supplier to provide you with the replacement goods. Please be aware that while the replacement may have similar specifications and functionality, it may not be the same make or model. Please also be aware that the damaged goods remain Flexirent’s.

- Flexicare may at its discretion, determine that it is cheaper or more effective to release you from your contract. This will be determined by the cost of repair/replacement.

Total Loss/ Theft Claims

These losses arise primarily from Theft or Burglary, but could also occur due to some other form of accidental loss.

- Flexicare may decide to replace the equipment.

Note: that this category of claim may require more detailed investigation by Flexicare.

What you need to do:

- If the total loss is the result of a theft or burglary, please immediately report the incident to the police and note the police report number, police station and telephone number of the police station reported to.
- Complete the Incident Notification Form and ensure you provide full details of the incident and remember to sign the form.
- You should approach the original supplier if possible to obtain a quote to replace the loss/stolen equipment. If you are unable to contact the original supplier you can obtain a quote from another supplier. The quote must be for either the same or similar piece of equipment. You can not upgrade to a better model.
- All quotes and tax invoices should be made out to Flexirent Capital Pty Ltd, PO Box 2345, St Leonards, Sydney, NSW, 1590
- A cheque for the Administration charge must be attached to the form (the cheque is to be made payable to "Flexirent Capital Pty Ltd" or alternatively if paying by credit card, you may complete your credit card details on the Incident Notification Form.
- The completed Incident Notification Form, Administration Charge and Quote can be submitted to:
Flexirent Capital Pty Ltd, PO Box 2345, St Leonards, Sydney, NSW, 1230
Or
Fax 1300 135 504

What we will do:

- On successful receipt of the Administration Charge, Flexicare will send you a Tax Invoice to cover this payment.
- As long as all the paperwork has been satisfactorily completed a response will be given within 3 working days, unless Flexicare decides to investigate the loss.
- An email confirming Flexicare's decision will be sent directly to the supplier, authorizing replacement of the equipment. This will act as a purchase order. You will be notified of the decision according to your preferred contact method.
- You will be asked to contact the supplier directly regarding delivery of the equipment. If necessary, the supplier will deliver the equipment directly to you. The delivery costs, per the quotation, will be billed to Flexirent Capital Pty Ltd.
- The supplier will submit a tax invoice to Flexicare. The tax invoice will be for the replacement equipment and delivery costs.
- Flexicare will pay the supplier directly, within 7 business days of receiving the tax invoice.
- Flexicare may at its discretion, determine that it is cheaper or more effective to release you from your contract. This will be determined by the cost of replacement.