

BREAKDOWN REIMBURSEMENT CLAIM FORM

If you have paid any costs that are covered under your policy or were agreed by RAC, please complete this claim form within 90 days of the breakdown and email it with copies of your receipts to:

SagaBreakdownCustomerCare@rac.co.uk

Or write to us at:

Saga Breakdown Customer Care, RAC House, Brockhurst Crescent, Walsall WS5 4AW

Please allow 60 days for validating and processing your claim. If you paid by credit card, Saga and/or RAC will not be responsible for any interest charges.

| Customer details | |
|-----------------------------|--|
| Title | |
| Initial | |
| Surname | |
| Address | |
| Postcode | |
| Telephone number | |
| Mobile phone number | |
| Email address | |
| Policy number | |
| Vehicle make and model | |
| Vehicle registration number | |



ADDITIONAL DOCUMENTATION REQUIRED

If your claim is as a result of a **break-in or theft**, you must also enclose a police report obtained within 24 hours of the incident.

If you're claiming under **Replacement driver**, you must also enclose written confirmation from the treating hospital or medical expert that you were unable to drive.

If you're claiming under **Missed connection**, you must also provide evidence of your original pre-booked connection. If you missed a connection due to your car being fixed in a garage please also provide proof of the date the car was fixed.

If your claim is successful, please choose your preferred payment method below:

Cheque Bank transfer

If bank transfer, please provide the following:

Account holder's name:

Account number: Sort code: - -

PLEASE MAKE SURE YOU ENCLOSE THE FOLLOWING:

1. Claim form
2. Receipts or copies of receipts
3. If applicable:

Police report (for theft or break-in) Written confirmation from doctor or hospital (for Replacement driver)

Proof of original pre-booked connection and date car was fixed (for Missed connection)

DECLARATION

I declare the above information is true and complete to the best of my knowledge. I understand that my details will be used by RAC Motoring Services and/or RAC Insurance Ltd in order to process and validate my claim and agree RAC Motoring Service and/or RAC Insurance Ltd may need to share my details with third parties in order to do so. I have enclosed documents as required in support of my claim. I understand that failure to provide all the relevant information with this claim form may delay the processing of my claim.

Signed: Print name: Date:

Saga Services Limited is an insurance intermediary and wholly owned subsidiary of Saga plc.

Registered in England and Wales (Company No. 732602). Registered Office: Enbrook Park, Sandgate, Folkestone, Kent CT20 3SE.

Saga Breakdown Assistance is provided by RAC Motoring Services (Registered No 01424399) and/or RAC Insurance Ltd (Registered No 2355834). Registered in England; Registered Offices: RAC House, Brockhurst Crescent, Walsall WS5 4AW. RAC Motoring Services authorised and regulated by the Financial Conduct Authority in respect of insurance mediation activities. RAC Insurance Ltd is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority.

SAGA

