## **CLAIM HISTORY REQUEST**

| TO:  | DATE:   |
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| ATTENTION: UNDERWRITING DEPARTMENT   |   |
| RE: REQUEST FOR CLAIM HISTORY LETTER YOUR POLICY NUMBER(S)   |   |
| I have recently purchased automobile insurance from th<br>for claim-free insurance record, I will need a letter from   | e Insurance Corporation of British Columbia. To receive a discount your Company which provides: |
| • policy number(s) and dates of coverage for automobilities dates of coverage in your letter (dd, mm, yyyy).   | pile insurance provided by your company. Please show the exact                                  |
| • details of all claims charged against third party lega   | l liability and/or collision coverages;   |
| • named drivers, if any, and the dates (dd, mm, yyyy)  | they were covered on the policy.  |
| If you wish to clarify what the Insurance Corporation of 1-604-661-2800 or toll-free throughout Canada and the to Friday, or 9:00 am and 5:00 pm Saturdays and holidate. | USA at 1-800-663-3051 between 8:00 am and 7:00 pm, Monday                                       |
| Thank you for your attention to my request.  |   |
| See reverse side for a sample of the letter ICBC need  | s from you.   |
|  |   |
| POLICYHOLDER NAME:   |   |
| SIGNATURE(S):  |   |
| PLEASE MAIL YOUR<br>REPLY TO ME AT:  |   |
|  | BC Postal Code  |