

Platinum RV Guard Insurance Claim Form

Authorization #

Date

micadjuster@firstcanadian.ca

Phone 1 780 417 5486

Owner Information

Certificate holder's Name		Home Telephone	Work Telephone
Street Address	City	Prov	Postal Code

Vehicle Information

Year	Make	Model	☐ Motorhome ☐ 5th Wheel ☐ Trailer
Vehicle ID Number		Kilometers at Purchase	Kilometers at Claim
Policy Number	Purchase Date	Last Inspection	Expiry Date

Claim Information

PLATINUM MAINTENANCE COVERAGE ☐ AWNING, ARMS AND FABRIC ☐ ROOF TOP VENT	PLATINUM APPEARANCE COVERAGE ☐ DENTS AND DINGS ☐ EXTERIOR DECAL ☐ EXTERIOR SCRATCHES ☐ CUTS, TEARS & BURNS	PLATINUM ROAD HAZARD COVERAGE ☐ DAMAGED TIRES ☐ DAMAGED RIMS ☐ DAMAGED EXTERIOR LIGHTS ☐ DAMAGED GLASS
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Details of claim:

Estimate:	#	Amount (\$)	Labour	Total
Part No.				
Part No.				
Part No.				
Part No.				
Part No.				
Part No.				
Subtotal				
Tax				
Total				

Email completed form and photos of damaged area to micadjuster@firstcanadian.ca

Repair Facility

Dealer Name	Contact Person	Telephone	Fax
Street Address	City	Prov	Postal Code
Owner Signature	Service Representative	MIC Authorized	
Date	Date	Date	

