How to complete and return the required documentation

THE PERSON COMPLETING THIS DOCUMENT MUST BE THE TESCO MOBILE POLICYHOLDER/AUTHORISED USER AND MUST PROVIDE A COLOUR COPY OF THEIR VALID ID.

Follow the steps below to return your documents by post or fax:

Post

- 1. Fill out and sign the Claim Statement. All fields are mandatory.
- 2. Take a colour copy of your valid ID (see below for acceptable forms of ID) and write your mobile number on each page.
- 3. Post your documents to Tesco Mobile Protect, PO Box 670, Brentford, TW8 1DA.

Fax

You can fax your documents to 0203 249 7942.

Tips to speed up your claim

Please make sure that all document photos, scans, photocopies or faxes are in colour

Acceptable forms of ID: Passport, UK Driving Licence, EU National Identity card or 2 documents showing the address associated with the policy (e.g. bank statements, landline phone bills, council tax bills, electoral roll registration) dated within the last 90 days.

Make sure all document scans or faxes are clear and easy to read

- When making the photocopy of your valid ID, consider using the enlarge and contrast settings to make it easier to read and ensure all 4 corners are visible
- Colour copies of your valid ID are required, black and white copies are unacceptable
 Please return your signed form to us as quickly as possible to ensure speedy processing of your claim.

Questions? Call us on 0345 030 3290, 8am-9pm Monday to Friday, 8am-8pm on Saturday and 9am-6pm on Sunday. We are also open on Bank Holidays (excluding Christmas Day and Easter Sunday). Calls to 03 numbers cost the same as calls to UK landlines starting 01 and 02. Calls from landlines and mobiles are included in free or inclusive calls packages. Details correct at time of print.





Claim Statement

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INSURANCE FRAUD IS A CRIME

A person who knowingly presents a false or fraudulent insurance claim with the intent to defraud or deceive an insurer is guilty of a crime and we may report this to the police to pursue prosecution for fraud.

what device are you claiming	Or? ALL FIELDS ARE REQU	IRED. PLEASE PRINT	IN CAPITALS USING BLUE OR BLACK INK.
Mobile number:			
Manufacturer:(Examples: Apple, Samsung,	I G etc.)	Model:	es: iPhone13, GalaxyS22, G5, etc.)
What happened to the device?	. ,	(Deci i po	0. ii 101015, datayozz, do, do.)
My device is: ☐ Lost ☐ Stolen	☐ Damaged ☐ Faulty outs	side of warranty	
If lost or stolen: Did you lose your Te	sco SIM, with the mobile numbe	r quoted above, at the	same time?:
Date and approximate time it happer	ned: Wi	nere it happened:	
Describe what happened (Tell us in de	etail what happened to your device.	e.g. Where you were, wha	at you were doing, how you were using your device)
Policyholder/authorised user i	nformation (for verification	purposes only)	
Full name:			
Contact number:	Alternate	contact number:	
Email address:			
Postal address:			
City:	County:		Post code:
Claim declaration			
•	best of my knowledge and belief	. I understand that a pe	nd that the information and documents rson who knowingly presents a false or and may be reported to the police to
Signature:			Date: