

Submit this completed form and all required documentation to insuranceservices@asu.edu.

Risk Management use only

ASU Claim #: _____

Section 1: Document requirements

In order to properly assess the claim, the following must be submitted with the claim, where applicable.

- Loss report.
- Detailed quote/estimate.*
- Rental agreement.*
- Pictures.
- Police report if vandalism is suspected.

*For rented vehicles only.

Section 2: ASU department information

Department name: _____

Campus: _____ Mail code: _____

Contact name: _____ Contact phone: _____

Account number for reimbursement: Cost center: _____ Program code: _____

Section 3: ASU vehicle information

Was this a: ASU-owned vehicle ASU-leased vehicle Rented vehicle

ASU-issued vehicle number: _____ Estimated amount of damage: _____

Year: _____ Make: _____ Model: _____ License #: _____

What is the point of impact on the vehicle? _____

Was the vehicle being driven at the time of damage? Yes No | If 'No' go to Section 5.

Section 4: ASU driver information

Who was driving? ASU employee/student worker Registered Volunteer Other

Last name: _____ First name: _____

Contact number: _____ Email: _____

Address: _____ City: _____ State: _____

Driver's license #: _____ Operator CDL State: _____ Expiration: _____

Section 5: Incident information**Date of incident:** _____ **Time of incident:** _____ **Police report:** _____**Location of incident:** _____ City: _____ State: _____

Cross streets: _____ Highway: _____ Mile Marker: _____

Windshield damage was caused by:

Did you attach Pictures? No Yes | Attach all pictures in an email as .jpg or .PDF.

Important information:

1. **Rented vehicles:** For vehicles rented for ASU business that sustain windshield damage, please submit a copy of the rental agreement, pictures, and the estimate for damages.
2. **ASU owned/leased vehicles:** Windshield damage done to ASU owned/leased vehicles are handled by Safelite. Please submit this form along with pictures of the damage to insuranceservices@asu.edu. Once you receive the claim number, please contact safelite.phoenix.rental@safelite.com and copy commercialbilling@safelite.com to schedule an appointment to repair the windshield. You will need to complete the table below and include it in your email to set up the appointment. Once the windshield has been repaired please send the Safelite invoice to insuranceservices@asu.edu, **do not pay this invoice** as Risk Management Services will submit the invoice for payment to the Business Center.

ASU Account	009036
Claim#	
[Your] Contact Name	
[Your] Contact Number	
Location of the Vehicle	
Year, Make, Model, License	
ASU Vehicle Number	

3. **Pictures:** Photos serve to substantiate the extent and type of damage, legitimizing the claim, providing proof of unlawful entry, or exhibiting type of specialized equipment.
 - **Vehicle damage:** Include full-frame pictures of the entire vehicle and provide close-up pictures of the actual damage. Vehicle damage should include around 7 clear, full-color photos. Windshield damage should include at least 1 full frame and 1 close up.

For any questions regarding this form or the insurance recovery process, please:

Visit: <https://cfo.asu.edu/insurance-services> | Email: insuranceservices@asu.edu | Call: 480-965-7700