

PERODUA AUTO ASSIST CLAIM FORM

Name of Member :	Repair Amount :
Name of Authorized Driver :	Outlet Name & PIC :
NRIC :	Bank Name :
Tel No. :	Account No. :
Vehicle Registration No. :	Current Address :
Vehicle Registration Date :	
Breakdown/Accident Date :	

No	PARTICULARS (Please tick (✓) if applicable)	DOCUMENTS	AMOUNT	
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1.	Medical Benefits * <input type="checkbox"/> Hospitalization : RM150/day @ max 5 days (RM750) only per incident OR <input type="checkbox"/> Outpatient : up to RM100	<input type="checkbox"/> Warded / Medical Report <input type="checkbox"/> Police Report <input type="checkbox"/> Perodua Repair Order <input type="checkbox"/> Official Receipt		
2.	<input type="checkbox"/> Car Rental^{1 2 *} Note: Max amount of RM100 only per incident	<input type="checkbox"/> Rental Receipt <input type="checkbox"/> Police Report <input type="checkbox"/> Perodua Repair Order		
3.	<input type="checkbox"/> Hotel Accommodation^{1 *} Note: Max amount of RM150 only per incident	<input type="checkbox"/> Hotel Receipt <input type="checkbox"/> Police Report <input type="checkbox"/> Perodua Repair Order		
4.	<input type="checkbox"/> Flood (additional towing) * Note: Max amount of RM100 only per incident	<input type="checkbox"/> Official Receipt <input type="checkbox"/> Repair Order		
5.	<input type="checkbox"/> Car Stolen * Note: Max amount of RM300 only per incident	<input type="checkbox"/> Police Report <input type="checkbox"/> Rental Receipt <input type="checkbox"/> Rental Agreement		
6.	<input type="checkbox"/> Loss Personal Belonging (Car Break-In) * Note : Max amount of RM150 per incident	<input type="checkbox"/> Police Report <input type="checkbox"/> Photos of Incident <input type="checkbox"/> Perodua Repair Order		
7.	<input type="checkbox"/> Data Not In Record * Note : Max amount of RM600 (Breakdown) & RM300 (Accident)	<input type="checkbox"/> Insurance Cover Note		
8.	<input type="checkbox"/> Other Benefits * Please state :	<input type="checkbox"/> Police Report <input type="checkbox"/> Relevant Particulars/Details		
TOTAL				

Subject to:

1. Accident and breakdown occur 100km from the customers' place of residence.¹
2. Total cost of repair should be RM3500 and above.²
3. All reimbursement claims must be accompanied by this **Perodua Auto Assist Claim Form, Insurance Cover Note/Policy and copy of owner IC.**
4. Documentation for claims must be submitted within 2 weeks from the date of breakdown/accident. Otherwise, all benefits entitlement will be forfeited.
5. All Perodua Auto Assist benefits are available only for vehicles repaired at authorized Perodua Service Centre or Perodua Body & Paint.

CLAIM MADE BY,

Customer Name : _____

Request Date : _____

APPROVAL AND ACKNOWLEDGEMENT

(I) PERODUA SALES SDN BHD (PSSB)

Checked and Approved by,

Asst. Manager / Manager / Sr. Manager / DGM / GM : _____

Date : _____

Company Stamp : _____