

## Key Replacement Proof of Loss

Claim No.: \_\_\_\_\_

Name \_\_\_\_\_ Member No. \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Date of Loss \_\_\_\_\_ Original Selling Dealership \_\_\_\_\_

Cause of Loss \_\_\_\_\_

[if damaged, you must provide us with the damaged key(s)]

Give a brief description of the facts and circumstances surrounding the loss/damage of the key(s) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Date Vehicle Purchased \_\_\_\_\_ Number of keys at time of purchase \_\_\_\_\_

Is key damage covered under your vehicle warranty? \_\_\_\_\_

Any person who knowingly, and with intent to defraud, files a statement of claim containing any false or misleading information may be guilty of fraud, and may face criminal penalties in accordance with state law.

I hereby swear and/or affirm that the answers provided herein are true and correct.

Signature of Contract Holder: \_\_\_\_\_ Date: \_\_\_\_\_

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**Return all documentation to:**  
TWClaims@nationsafeddrivers.com  
or  
**Claims Center**  
5600 Broken Sound Blvd NW  
Boca Raton, FL 33487