

GAP COVERAGE – LOSS REPORT FORM

The loss must be a total loss to be eligible under GAP coverage.

Claims must be submitted within 30 days of receipt of the Primary Carrier settlement or 30 days from date of repossession, whichever is later.

Insured Lender:	_____	Report Date:	_____
GAP Policy Number:	_____	Claim Filed By:	_____
Loan/Lease Number:	_____	Phone #:	_____
Borrower Name:	_____	Cause of Loss: (please check)	
Date of Loan/Lease:	_____	Collision	<input type="checkbox"/>
Year, Make, Model:	_____	Comprehensive	<input type="checkbox"/>
Vehicle ID # (VIN):	_____	Theft	<input type="checkbox"/>
Primary Insurance Co.:	_____	If Theft, was a Police Report filed?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Phone #:	_____	Police Dept.:	_____
Contact:	_____	Phone #:	_____
Claim #:	_____	Report #:	_____
		Date of Loss:	_____
			(Date of Accident or Theft)

Attach ALL OF THE FOLLOWING REQUIRED documentation:

- Copy of GAP contract / waiver
- Copy of Original Loan Agreement & Advance Voucher
- Complete Payment History Record showing loan inception through primary insurance settlement posting
- Primary Insurance Settlement documentation, including copy of settlement check, total loss evaluation report, and settlement calculation breakdown
- Copy of Retail Buyer's Order, Purchase Order, or Bill of Sale
- Copy of Title
- Copy of Warranty Contract (if applicable)
- Any other Refundable Items (if applicable)
- Replacement Vehicle Benefit documentation (if applicable)
 1. Copy of Purchase Order and/or Bill of Sale
 2. Copy of new Security Agreement and new Funds Advance Voucher

E-mail claim information to
gapclaims@evans-simpson.com

Or fax claim information to
Evans, Simpson & Associates at
770-982-1418

The following section will be completed by Evans, Simpson & Associates:

Current Loan/Lease Balance as of Date of Last Payment:	\$ _____
Less Unearned Interest or Plus Accrued Interest:	\$ _____
Less Payments Delinquent more than ____ days:	\$ _____
Less Late Fees, Finance Charges:	\$ _____
Less Unearned Insurance Premium & Warranty Fees:	\$ _____
Equals Estimated Net Payoff:	\$ _____
Less Amount Paid by Borrower's Primary Insurance:	\$ _____
Less Amount of Borrower's Primary Deductible:	\$ _____
Equals Estimated GAP Claim:	\$ _____