

BICYCLE INSURANCE CLAIM

Partial Damage Claim Invoice

Claim Date: 05.08.2025
Claim ID: PDC-2024-0622-AB

CLAIM TYPE: Partial Damage (Accidental Damage - Not Total Loss)

Policyholder Information

Name: Anna Becker
Address: Uhlandstraße 20, 80336 München
Insurance Policy Number: BIKE-3421987

Insurer / Repair Shop Information

Name: Fahrrad Wagner GmbH
Address: Musterstraße 12, 10115 Berlin
IBAN: DE40 7001 1111 3456 7890 00

Bicycle Details

Manufacturer & Model: Cube Nature Pro 2023
Serial Number: CUBE9876543
Date of Purchase: 01.04.2023

Incident Description

Incident Date: 22.06.2024
Damage Circumstances: While parked outside work, a car reversed into my bike, bending the rear wheel and breaking the rear derailleur. The frame and main mechanicals are otherwise undamaged.
Police Report: Not required, as this was accidental damage and not vandalism or theft.

Documentation Provided

- Photos of damage (rear wheel, broken derailleur)
- Workshop assessment and repair estimate
- Original purchase receipt (for proof of value)

- Completed claim form

Repair Invoice

Position	Description	Quantity	Unit Price	Total
1	Rear wheel replacement	1	110.00€	110.00€
2	Rear derailleur, Shimano	1	65.00€	65.00€
3	Labor (wheel install)	1	25.00€	25.00€

Subtotal 200.00€

VAT 19% 38.00€

Total (Gross) 238.00€

Claim Statement / Settlement Request

I request reimbursement for the cost of repairing the damaged parts, as per attached invoice and photographic evidence. The damage does not meet criteria for total loss. Please process as **partial damage** under my policy's accidental damage clause.

Policyholder Signature: _____ **Date:** _____

Anna Becker

05.08.2025