

WIRELESS EQUIPMENT INSURANCE CLAIM AFFIDAVIT FAQs

What do I need to do?

1. Complete this form.
2. Submit the form and a copy of a valid government issued ID of the Insured Subscriber by fax, email, or mail.
3. Please wait 24 hours while your form is reviewed.
4. After 24 hours, call us back at (855) 309-8343 to complete your claim.

What type of identification do I need?

Any of these government-issued photo IDs will work. The name on the ID must match the Insured Subscriber's name. Be sure your copy is clear, readable, and not altered.

- Driver's License
- State Issued ID
- Resident Alien Permit
- U.S. Passport
- Immigrant Visa
- U.S. Military ID

What if I don't have all this information?

If you don't have the Email Address, Contact Number(s), or the Claimed ESN/MEID, go ahead and submit the form. **All other information is required.** Including your contact information will help prevent a delay in processing.

Where can I find my device's ESN/MEID?

Here are three places to look for the ESN/MEID:

- Your original receipt
- Contact your wireless carrier
- If you still have your device:
 - For iPhones: select "Settings", "General", and "About" to locate your MEID.
 - For most other devices: your ESN/MEID is located under the battery.

How do I submit my documents?

For fastest results: fax them to (877) 389-2146 or email them to Documents@esecuritel.com.

You can also mail them to eSecuritel Holdings, LLC, Attn: Fraud Management, P.O. Box 03, Alpharetta, GA 30009-9998.

What's the next step?

After submitting your document, wait 24 hours for it to be reviewed. After 24 hours, please call us back at (855) 309-8343, to complete your claim.

WIRELESS EQUIPMENT INSURANCE CLAIM AFFIDAVIT

IMPORTANT LEGAL NOTICE: A person who knowingly presents a false or fraudulent insurance claim with the intent to injure, defraud, or deceive any insurer is guilty of a crime and may be subject to fines and confinement in prison. When fraud is discovered, eSecuritel will take appropriate steps to stop such fraud and will explore all available legal remedies.

Section I: Subscriber Information

Insured Subscriber's Printed Name _____ Mobile Number _____

Claim ID _____ Wireless Carrier _____

Billing Address _____

City _____ State _____ Zip Code _____

Email address _____ Contact Number(s) _____

Your contact information will not be shared with any 3rd parties. The information will only be used to contact you about the status of your claim.

A valid copy of one of the following government-issued IDs must be submitted with this form. Select the type provided.

Driver's License	
U.S. Passport	

State Issued ID	
Immigrant Visa	

Resident Aliant Permit	
U.S. Military ID	

Section II: Claim Details – Complete for all claims

If your phone has been lost or stolen, you must report your phone as lost or stolen to your wireless carrier before submitting this affidavit. You must request the phone to be permanently disabled on your carrier's network to prevent further usage.

Claimed Phone Make/Model _____ Claimed ESN/MEID* _____

**Where can I find my claimed phone's ESN/MEID? See FAQs.*

Loss/Incident/Failure Date _____

Check One: My phone was Lost Stolen Damaged Just Stopped Working

Detailed description of what happened

Section III: Claim Agreement

I hereby make an insurance claim against the insurance company as shown on this insurance claim affidavit. I acknowledge that if any property which is the subject of this claim and which is replaced or paid for by the insurer is recovered at any time, it is the property of the insurance company and must be returned to the insurance company. I understand that if I fail to return such property, I am subject to, and authorize, a non-return fee.

I swear or affirm that the wireless device I am claiming is owned by me and that the information provided above is true and accurate. I understand that any false or misleading statement made herein is fraud and I may be found guilty of a crime. eSecuritel will explore all legal action possible in the event of a fraudulent claim.

Insured Subscriber's Signature _____ Date _____