



**REPORT INSURANCE CRIME.
TAKE THE TIME.**

Call (24/7):
1-877-IBC-TIPS



INSURANCE CRIME COSTS YOU!

Please complete this form to the best of your knowledge, save it and submit it to:

By Fax: IBC TIPS c/o IBC Investigative Services
416-252-6940; or
By Mail: 365 Evans Ave., Toronto, ON M8Z 1K2

IBC TIPS TEMPLATE

Intake Date:	Intake Time:	Intake Clerk:	File #:

TIP INFORMATION: (If you run out of space, feel free to attach additional pages.)

Tell us about the tip:	
Name of Individual or Business (you are reporting on)	
Date of Birth: (If Available)	
Address:	

INSURANCE DETAILS: (If Available)

Insurance Co.	
Policy/Claim #	

INCIDENT INFORMATION: (Lines will expand as you type)

Date of Incident:	
Type of Incident:	
Location of Incident:	

VEHICLE INFORMATION: (if applicable)

Year	Make	Colour	Plate #

VOLUNTARY INFORMATION: (this is not required)

Your Name:	Your Phone#	Can We Contact You: (X)
		Yes () No ()