

PROPERTY CLAIM FORM (Fire, Theft, Glass, Loss or Damage)
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The issue of this form is not admission of liability. It should be completed as fully and accurately as possible and returned immediately.

Claim No. _____	Policy No. _____	Date of Expiry _____
Name of Insured: _____		
Home Address: _____		
Business Address: _____		Tel/ Mobile No: _____
Occupation/ Business: _____		Tel No: _____
Nature of loss or damage: _____		
Date: _____	Time: _____	Place: _____
Describe fully how it occurred: _____		

When and by whom discovered? _____		
State Name & Address of person responsible for the loss or damage. _____		
At what Place, Date & Time was the property last seen by you? _____		
Is any part of the premises lent, let or sublet or are paying guests received? If so, give details. _____		
Was the premises unoccupied at the time of loss or damage? If yes, please state period. _____		
Were particulars taken by or reported to the police? if Yes, (a) give Name of Station (b) give Date & Time (c) attach a copy of the report		YES/ NO _____
What other steps have been taken to recover the property? _____		
Are there any steps taken to prevent a recurrence? If yes, give details. _____		
What is the total value of the Property at date of occurrence? _____		
Do you own the Property? If No, give name and address of the owner. _____		
Is the property subject to a hire purchase or loan agreement? If yes, give name and address of finance or lending company. _____		
Is there any other insurance on the property? If yes, give details.		YES/ NO _____
Have you had any previous losses arising from risks covered under this policy or any similar policies? If Yes, give brief details.		YES/ NO _____
if this claim concerns jewellery, give name and address of Jeweller who last examined it. _____		
Additional Questions for Glass Breakage Claims: (a) Size and Type of broken glass (b) Situation (e.g.. door, window, showcase etc.)		

(Please complete the reverse of this form)

