

CLAIM NO: _____

CLAIM for LOSS or DAMAGE under

POLICY/CERTIFICATE NO:

1. Name of Assured _____
2. Address _____ Telephone No. _____
3. Is Claim for Loss/Burglary/Theft/Damage _____
4. If other than damage:
 - (a)(i) Police Station notified _____ (ii) Crime Reference No. _____
 - (b) Date of notification _____
 - (c) What other steps have been taken to recover the property? _____
5. If loss – Place, date & time property last seen _____
6. Date of loss or Damage _____
7. Place of loss or Damage _____
8. Are there any other Insurances on the property claimed for? _____
9. Are you the sole owner of the property claimed for? _____
10. Are you able to recover V.A.T? _____ YES/NO
11. State circumstances under which loss or damage took place – _____

DESCRIPTION OF ARTICLES	WHEN BOUGHT	ORIGINAL COST PRICE	ALLOWANCE FOR WEAR AND TEAR	VALUE OF SALVAGE (if any)	NETT AMOUNT CLAIMED

Where Buildings are Insured, Claims in respect of Damage thereto should be accompanied by a Detailed Builders Estimate

I HEREBY DECLARE that the property claimed for has been lost, stolen, destroyed or damaged and that all statements on this form are, to the best of my knowledge and belief, correct.

Date _____ Signature of Claimant _____