

## ACCIDENTAL DAMAGE CLAIM FORM

Broker /Agent or Code

CLAIM NUMBER

### 1. Details of Insured

Name of Insured \_\_\_\_\_ Policy Num \_\_\_\_\_  
Address of Insured \_\_\_\_\_ Tel/Cell \_\_\_\_\_  
Business Address \_\_\_\_\_ Tel/Cell \_\_\_\_\_  
Postal Address \_\_\_\_\_ E-mail(if any) \_\_\_\_\_

### 2. Details of loss

Date of loss \_\_\_\_\_ Time \_\_\_\_\_ pm / am , Place of loss /damage \_\_\_\_\_

Briefly explain how the loss occurred

.....  
.....  
.....  
.....

Have you ever suffered a loss of this nature? Yes/ No , if yes give details and name of insurer if any .....

.....

Were the premises occupied at the time of loss: Yes / No , if 'No' when was it last occupied \_\_\_\_\_

### 3. Section to be completed for fires

Which Police station was the loss reported \_\_\_\_\_ Date of Report \_\_\_\_\_ Police Ref No \_\_\_\_\_

Did the Police record any suspects Yes / No , if 'Yes' give details \_\_\_\_\_

### 4. Details of Property Lost /Stolen or Damaged

	Yes/No	Details
Are you the owner of the property, you are claiming, if 'No' give details		
Is the property also insured by another Insurer or under another Policy e.g. Motor, All Risks etc, if 'Yes' give details		
Is the property under Hire Purchase, Mortgage or does any other person have an interest in the property, if 'Yes' give details.		

**5. To be completed only for damage to the buildings**

State Type of Premises e.g. Private House, Flat, Shop, Gazebo etc	
Type of Construction e.g. Brick, Concrete, Thatch etc	
Were the premises unoccupied or unfurnished, if 'No', please state for how long has the property been unoccupied.	
Are you the owner of the premises or tenant? If tenant, are you responsible for repairs.	

**QIC02/05**

**6. SCHEDULE OF DAMAGED PROPERTY**

**6.1 Buildings, Fixtures and Fittings, and/or breakage of sanitary fixtures (Estimate required)**

Description of Property damaged or lost	Approx. age (Years)	Estimated Cost of repair	Amount Claimed

**6.2 Stock, Contents, and/or Personal effects**

**Household Goods**-If articles can be repaired, repairer's estimates should be furnished.  
**Trade Stocks** – Invoice prices and discounts and the value of the salvage should be stated.  
**Salvage** – Must be protected from deterioration until the claim is settled.

Description of item (State Make, Model and Serial Numbers where applicable)	Year of Purchase	Is there any salvage? If so give description and location	Estimated Cost of repair	Replacement Cost if not repairable

**6.3 Breakage of Glass**

No. of panes	Position	Is glass in a conservatory, greenhouse or outbuilding	Description of glass broken	Size (Length by Width)	Whether cracked or smashed and whether there is something to recover.

6.4 Loss of Money

Cash	Cheques	Postal or Money Orders	Amount Claimed

Where was the money kept at the time of loss /Theft \_\_\_\_\_

I /we declare to the best of my/our knowledge and believe the foregoing particulars and the information appearing herein are a complete and full disclosure of the circumstances connected with this claim, that they are true and correct. I /We undertake to render the Company every assistance in my/our power in dealing with the matter.

Signature \_\_\_\_\_ Date \_\_\_\_\_

*The issue of this form is not an admission of liability on the part of the Company*