

HOME INSURANCE CLAIM FORM

SECTION 1: DETAILS OF POLICYHOLDER & POLICY

SECTION 2: DETAILS OF WHEN, WHERE & HOW LOSS / DAMAGE HAPPENED

Date of Loss / Damage? _____

How did the loss / damage happen? (If theft from a building, give details of how entry was gained)

If caused by someone who is not a member of your household, e.g. tradesman, give name & address

IF PROPERTY WAS LOST OR STOLEN, PLEASE ANSWER THE FOLLOWING QUESTIONS

Were the police notified?

When & at what Police Station was report made?
(Please provide any report or acknowledgement given by Police)

If theft from the Insured Address, is the property let? _____

SECTION 3: OTHER INSURERS – COMPLETE FOR ALL CLAIMS

If the property for which you are claiming is also insured under any other policy, give details

SECTION 4: BUILDING DAMAGE – DETAILS OF CLAIM

Estimated full cost of repair: _____

Actual cost (if all work is done): _____

If you have obtained estimates of accounts, please attach and send with the completed form

N.B.: If you are still awaiting estimates, don't delay sending us the form

Tick Box, if estimates are being obtained and are to be sent later YES NO

If you are not the owner of the building, state:

Name and address of owner (other than mortgagor)

Why do you have to pay for the repairs? E.g. terms of lease etc.

How much are you claiming? _____

SECTION 5: CONTENTS OR VALUABLES CLAIM – DETAILS OF CLAIM (send us any estimates / accounts)

Please complete ALL columns – we will deal with your claim in accordance with the cover given by your policy

(State currency)

Declaration

I/We declare that the statements made are true to the best of my/our knowledge and belief and I/we claim the amount above in respect of the items mentioned

Date: _____

Signature of insured: _____