

## PROPERTY LOSS / DAMAGE CLAIM FORM

INSURER		POLICY NUMBER		VAT REG NUMBER	
INSURED	Name & occupation				
	Address & phone number				
LOSS / DAMAGE OCCURRENCE	Date & time of loss / damage When was the loss / damage discovered?				
	Place where loss / damage occurred				
LOSS / DAMAGE PLACE	Were premises occupied?				
	If so, by whom?				
	If not occupied, when last occupied?				
	Purpose of occupation				
CAUSE OF LOSS / DAMAGE	Describe fully how the loss / damage occurred, stating how (if applicable) entry was gained to premises				
	If loss / damage was caused by another party, give name and address				
PREVIOUS LOSS / DAMAGE	Have you previously suffered loss / damage?				
	If so, give details				
	If insured, provide name of insurer				
POLICE	Police station				
	Police reference no.				
	Date reported				
OTHER INTEREST	Has any other party an interest in the insured property, e.g. Credit Agreement?				
	If so, give name and interest				
OTHER INSURANCE	Is there any other insurance covering the broken glass?				
	If so, give name of insurer				
VALUE	Estimated total value of all the property insured under the policy				
	When last valued?				
PAYMENT METHOD	You may select for added security, payment of any amount due to you directly into a bank account				
	Please specify the name of the bank, branch, name of account & account number				
	Name of bank		Branch		
	Name of account		Account number		
DECLARATION	I / We solemnly declare that I / We have suffered loss or damage to the property enumerated on the following page (attached) and that the said property was in my / our possession immediately prior to the said loss / damage which occurred in the circumstances described above.				
	<div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 33%; border-top: 1px solid black; text-align: center;">Insured's Signature</div> <div style="width: 33%; border-top: 1px solid black; text-align: center;">Capacity</div> <div style="width: 33%; border-top: 1px solid black; text-align: center;">Date</div> </div>				