

**Please help us to help you by:**

- completing all relevant questions in full as this can avoid the need for further enquiry and possible delay in settling your claim
- enclosing evidence of the amount(s) you are claiming
- signing and dating page 2 of this form

**Insurance fraud is a crime – please ensure all information is correct**

**1. Policyholder(s) details**

Policy number	<input type="text"/>	Claim number (If known)	<input type="text"/>
Full name	<input type="text"/> (Mr, Mrs, Miss, Ms)		
Postal address	<input type="text"/>		Date of birth     /     /
Telephone numbers	Home <input type="text"/>	Business <input type="text"/>	Mobile <input type="text"/>
Email	Home <input type="text"/>	Business <input type="text"/>	
Contact Person	<input type="text"/>		

**2. Details of claim (complete in all cases)**

Date of fire, accident or loss      /     /     Time of fire accident or loss      am / pm

Location of where loss or incident occurred    

(a) Please state full details of what happened

(b) Is the property owner/occupied, rented or let to tenants? Please specify which one.

(c) Is there insurance with any other company relating to this loss? If so, please give details.

(d) If loss was caused by another person who is not your employee, please give their name, address, and telephone number.

(e) Have you made any other insurance claims over the past 5 years?.....  YES  NO

If Yes, please give details

**3. Glass breakage**

If you are the tenant of commercial premises please provide proof that you are liable under the terms of your lease.

Particulars of Glass Damaged:

Description (plain, plate, mirrored, etc.)	Height	Width	Position (Door, window, etc)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**4. Police details (If burglary, theft, loss or malicious damage)**

(a) To which police station was it reported?    

(b) Date reported      /     /

(c) Attach police form      YES  NO

(d) Police file number



