

PROPERTY DAMAGE/LOSS CLAIM FORM								
INSURED	Policy number _____							
	Name and surname _____							
	Telephone numbers - during the day _____				Cell _____			
	Physical address _____							
	E-mail _____							
	Identity number _____				Occupation _____			
DETAILS OF DAMAGE/LOSS	State the date and time of the damage/loss _____							
	State the date and time the damage/loss was discovered _____							
	State the address where the damage/loss occurred _____							
	Total estimated value of loss _____							
	Please provide a detailed description of the event <span style="color: red;">(Should you require additional space, kindly use a blank paper and attach it to this form.)</span>							
RISK	Does any other insurer cover this damage/loss?						YES	NO
	If yes, please provide the name of the insurer as well as the relevant policy number _____							
PROPERTY DAMAGED/LOST/STOLEN		No of items	Description of property	Date acquired	Purchased / Acquired from	Cost	Deduction of wear and tear	Claimed amount
	1							
	2							
	3							
	4							
	5							
	6							
	7							
	8							
	9							

DETAILS OF DAMAGE/LOSS	No of items	Description of property	Date acquired	Purchased/Acquired from	Cost	Deduction of wear and tear	Claimed amount	
	10							
	11							
	12							
	13							
	14							
	15							
	16							
	17							
	18							
	19							
20								
<b>Total:</b>								
DECLARATION	<p>I/We hereby solemnly declare that I/we have suffered the loss of/damage to the property listed above and that the said property was my/our possession immediately prior to the said loss/damage, which occurred in the circumstances described above. I/We understand that the completion of this form does not bind the Insurer to payment of any claim. I/We further declare that the foregoing information is true in every respect and that I/we have not withheld any information connected with the loss from the insurer.</p> <p>Signature of the insured ..... Capacity ..... Date _____</p> <p><b>Please note: It is important that you notify the insurer immediately when you become aware of any pending prosecution, inquest or demand</b></p>							