

Burglary claim form

To help us deal with your claim promptly, please:

1. Answer all the questions

2. Submit

- i. Replacement invoices or other documents entered in support of the value of the item lost, stolen or damaged
- ii. In case of repairs, repair estimates and repair report in cause of damage.
- iii. Police abstract report form duly completed

3. However do not delay the submission of claim form if the above documents are not immediately available.

PLEASE NOTE

- All damaged property must be protected from further deterioration and should not be disposed of until authorized by the company.
- If you make a claim that is in any way fraudulent, unfounded or exaggerated, or make any false declaration, all benefits under this policy will be forfeited.
- Remember, the more information you provide to us, the easier it will be to process your claim. If the spaces provided for answers are inadequate, please write on and attach a separate sheet of paper.

Insured's Details

Name.....

Policy Number.....

Date of payment of last premiumperiod: From.....To.....

Address.....Tel No.....

Mobile.....Fax.....Email.....

Business or Occupation.....

V.A.T Registration No.....PIN No.....

1. Please state the full circumstances of the loss or damage.....
.....
.....
.....
.....

2. A) When did the loss occur (please specify date).....
.....
b) When was the loss discovered?
.....
c) Where was the loss discovered?
.....
d) By whom was it discovered?.....
.....
e) Were there witnesses present at the time of the discovery? Yes No

Please state their names and addresses:.....
.....
.....
.....
.....

3. If the property was lost
a) What steps have you taken to recover it?.....
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.....
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.....
.....
.....
b) When were the police notified?.....
.....
c) Which Station was advised?
If so, please state their particulars.....
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.....
.....

d) Do you suspect any person or persons? Yes No
If so, please state their particulars.....
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.....
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Declaration

I/We declare that the following answers are and complete to the best of my/our knowledge

Signature.....Name.....

Title Date.....

Company Stamp

