



ace insurance limited

General **CLAIM FORM**

INSTRUCTIONS TO PROPOSER

To assist us to consider your claim as soon as possible please complete ALL questions in full.

The personal information collected on this Claim Form will be held by ACE Insurance Limited and you have rights of access to and correction of this information under the Privacy Act 1993.

IMPORTANT: To assist the early settlement of your claim, please attach repair and/or replacement invoices.



GENERAL CLAIM

1. Name of Insured
 Postal Address
 Business Telephone
 Home Telephone
2. Your Broker
 Address of Broker
3. Date of Event: between am / pm and am/pm
4. Where did the event occur?

5. What happened, how did it happen and why

6. If your claim is for loss by Burglary, describe the method of entry

7. Name(s) and address(es) of person(s), if any, responsible
8. Name(s) and address(es) of witness(es), if any
9. Have the Police been notified? If so, which Station? Date reported?
 (Police must be notified of Burglary or Theft and should be asked for a formal acknowledgement).
10. What action has been taken to prevent a recurrence of this loss/damage?
11. Details of any salvage
12. Are you the sole owner of the property which is the subject of the claim? Yes No



GENERAL CLAIM

13. Is there any other insurance on the property which is the subject of this claim? Yes No

(If "Yes", please supply full details).

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14. Have you ever had a claim against any Insurance Company declined? Yes No

(If "Yes", please supply full details).

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15. Have you ever had any Insurance declined? Yes No

(If "Yes", please supply full details).

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NB: PLEASE COMPLETE THE SCHEDULE AND DECLARATION ON THE BACK



GENERAL CLAIM

DECLARATION

I/WE declare that to the best of my/our knowledge, the above are true statements of fact and that I/WE have not caused the loss/damage or by any fraud or wilful misrepresentation sought unjustly to benefit by the loss/damage and that the information detailed in the Schedule is a true and faithful account of the actual loss/damage.

I/WE agree to notify ACE Insurance Limited immediately if any of the lost or stolen property mentioned in this claim is subsequently recovered, and at ACE's option surrender the property to ACE Insurance Limited or refund the amount of money received by way of compensation for the property.

I/WE authorise the disclosure to ACE Insurance Limited of personal information held by any other person or organisation regarding or affecting this claim, and authorise ACE Insurance Limited to release to any other person or organisation information regarding or affecting this claim.

Dated at thisday of 2

Signature Witness Signature

Name Name

Address Address