



## PROPERTY CLAIM FORM

### 1: Policyholder Details

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Policy Number

Policyholder

Contact

Phone Number

Address

Post Code

Excess


### 2: Claim Details

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Name of person notifying the claim and role

Date of Loss (dd/mm/yyyy)

Loss Address

Type of Claim

Storm

**a) What has happened and the extent of the damage/loss?**

- Please provide full details of what has happened and how the damage was caused
- Please provide full details of the damage and extent of this damage, to include all items and areas affected.
- Also confirm if any repairs have been undertaken and / or damage estimates or costs.
- Finally please clarify whether the business is able to trade or whether the property is uninhabitable.

**3: Additional Information**

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**Storm**

Claim Type	Additional Information	Answer
<b>Storm</b>	Type of Premises	
	If roof damage, age and type	
	Areas, items and / or rooms affected?	
	Damage to fences, gates & moveable property in the open?	
	If the insured is a tenant, has the landlord had externals repaired?	
	Premises occupied?	
	If no to above, when were they last occupied?	
	Is property habitable?	
	Tree removal required?, if yes details	
	Still able to trade? (if applicable)	
	Estimates obtained?	
	Cost of repairs	
	Previous Claims	
	Details of Any Other Policies	

**4: Other Interested Parties** (e.g. tenant/property management agent)

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<b>Party and Name</b>	
<b>Telephone No</b>	
<b>Email</b>	
<b>Correspondence Address</b>	
<b>Preferred method of contact</b>	

<b>Party and Name</b>	
<b>Telephone No</b>	
<b>Email</b>	
<b>Correspondence Address</b>	
<b>Preferred method of contact</b>	

<b>Full Name</b>	
<b>Date</b>	
<b>Signature of Insured</b>	