



PROPERTY CLAIM FORM

1: Policyholder Details

Policy Number	
Policyholder	
Contact	
Phone Number	
Address	
Post Code	
Excess	

2: Claim Details

Name of person notifying the claim and role	
Date of Loss (dd/mm/yyyy)	
Loss Address	
Type of Claim	Theft - Away from Premises

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

Theft - Away From Premises

Claim Type	Additional Information	Answer
Theft - Away From Premises	Type of Premises	
	Time and Place of Theft?	
	Reported to the police?	
	Was theft from a vehicle?	
	If yes, was the vehicle unattended?	
	Where was the item within the vehicle and why?	
	Where was the vehicle at the time of the theft?	
	Was the vehicle securely locked?	
	What damage was sustained to the vehicle?	
	Any witness to theft or CCTV?	
	Copy of invoice for vehicle repairs available?	
	Crime Ref & Police Station	
	Has anyone been caught/arrested?	
	Does the policyholder own these items and are they responsible for them?	
	Do you have the Original Purchase Receipts? (If so please attach with claim information).	
	Estimates obtained?	
	Cost of claim	
	Previous Claims	
	Details of Any Other Policies	

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

Party and Name	
Telephone No	
Email	
Correspondence Address	
Preferred method of contact	

Party and Name	
Telephone No	
Email	
Correspondence Address	
Preferred method of contact	

Full Name	
Date	
Signature of Insured	