



CLAIM FORM

Loss and/or damage to property

Please answer all questions in full, using the spaces provided as well as additional pages as required.

Business Name

Contact Name

Phone Number

Email

Location of Loss, Theft or Damage

Postcode

Date of Loss, Theft or Damage

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Please state fully the circumstances of the event which has given rise to this claim.
(If the event is a theft from the Insured Property, please provide details on how entry was gained)

If claiming for loss or damage resulting from theft,
the date the matter was reported to the Police

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Please attach a copy of the Police Report or the
Policy Report Number

Please list all items and property lost, stolen or damaged here or attach a copy of the invoice for replacement items.

Full details of item including, make and model

Date of Purchase

Claimed Amount

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Any additional remarks or comments

Please supply bank details for settlement

<i>Account name</i>	<i>BSB</i>	<i>Account number</i>	<i>Reference</i>
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I hereby warrant the truth of the foregoing statements and the particular of the above items and I make the solemn declaration conscientiously believing the same to be true.

Signature

Date

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We value your privacy. Our Privacy Policy sets out how we collect, disclose and handle personal information under the Privacy Act and the Australian Privacy Principles. By providing us such information, you consent to these practices unless you tell us otherwise. Our Privacy Policy is available at www.insuranceadviser.net or by contacting us at info@allinsure.com.au