

Claim form General



The company does not admit liability by the issue of this form.
It is issued to enable the insured to lodge a written statement of claim

Branch
Policy No.
Due Date

Broker/Agent
Address

CLAIM NO. (Office use only) TYPE OF INSURANCE COVER

Important information

- Do not admit liability - Ask for any claim to be put in writing and refer all correspondence to Zurich Australian Insurance Limited (ZAIL Incorporated in Australia) Trading as Zurich New Zealand.
- Make sure you give us all the details about your claim. Attach a separate sheet if you have insufficient space on this form.
- Send all quotations you have received to repair or replace damaged property or invoices or receipts if the goods have already been repaired.
- In the event of a Claim, Zurich New Zealand will:
 - Within 10 business days of receipt of your claim, notify your broker (or you) of our decision as to whether the claim has been accepted or not or, advise you if we require additional information and/or notify you within 5 days if we have appointed a loss adjuster/loss assessor.
 - For claims where additional information is required, we will make a decision within 20 business days, dependant upon the time required for you (or other independent parties) to respond to a request for additional information.
 - In some cases, due to unusual circumstances or the complexity of a claim, these timeframes may not be practical and we will agree an alternate timeframe with your broker or you to make a decision on your claim. If we cannot reach an agreement, you are able to access our complaints handling procedures.

Brokers please note: You can monitor the progress of a claim via Zurich Claims Online 24 hours a day, 7 days per week.

Insured

Name of Insured

Address Postcode

Occupation Date of birth / /

Phone number (Private) (Business)

Date of incident / / Time am/pm

Where did the accident occur?
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Describe as fully as possible how the incident occurred.
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Do you consider any other party responsible for the incident? Yes No If 'Yes', give details
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Please fill in all relevant sections (Please PRINT your answers)

Are you the sole owner of the property lost or damaged? Yes No

If 'No', give full details of the owners or part owners

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Do you hold any other insurances under which a claim for this incident may be made? Yes No

If 'Yes', give full details

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Have you previously (in past 3 years) made a claim against any insurance company? Yes No

Schedule of property

Description of property lost or damaged (state each article/item separately)	When and where purchased	Purchase price \$	Present cost of replacement	Depreciation for age and condition	Amount claimed
		\$			\$
		\$			\$
		\$			\$
		\$			\$
		\$			\$
		\$			\$
		\$			\$
		\$			\$
Total amount claimed					\$

Special Risks, Burglary and Theft, Malicious Damage Claims.

Note: Police complaint acknowledgement forms to be attached to all cases of theft or loss.

Have police been informed of the incident? Yes No

Police Station reported to

Report Number

If 'No', please give reason

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Has the loss been advertised in the newspaper? Yes (please attach newspaper cutting) No

Details of any other steps taken to recover the article

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Describe the method of entry and the damage caused to the building

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When were the premises last occupied?

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Who was on the premises at the time of loss?

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For Glass, Wash Basin and Lavatory Pan Breakage Claims Only

Was the glass, basin, etc., cracked prior to the incident? Yes No If so, state date / /

For fire or impact by vehicle claims only

If a dividing fence or party wall was damaged, give name and address of joint owner

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If damage was caused by a vehicle, give details of owner/driver and vehicle registration number

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For storm and tempest and water damage claims only

Note: Do not delay in taking necessary action, such as emergency repairs, to prevent further damage

What steps have been taken to minimise damage?

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Has the building been physically damaged? Yes No

If 'Yes', give details (e.g. roof sheeting and/or tiles damaged)

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If there has been no physical damage to the building, give details of how water entered the premises

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Evidence of ownership and value

Please attach your receipts or other documents to establish evidence of ownership and the value of each item. In cases of equipment or property e.g. bicycles, television receivers, supply evidence of serial numbers for our confirmation to manufacturers and the police. Damaged property must not be disposed of until authorised by Zurich New Zealand.

WARNING: Wilful or reckless exaggeration or inflation of the amount claimed may forfeit the claim.

Declaration

I/We declare that all the particulars stated above and statements made in support thereof are true and correct, that no information relevant to this claim has been withheld, that no other person(s) have an interest of any kind in the said property and that all conditions and stipulations of the policy have been complied with.

I/We hereby claim from the Company in respect of the said loss, damage or accident and declare that the amount claimed above is based on a true value at time of the loss.

Signature

X

Date

/ /

