# Loss Report Form

V/6.753\_/v: 0.432

#### Property Damage Insurance

## Policy holder

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Policyholder |  | | | |
| Person to contact |  | | | |
| Street |  | | | |
| Postcode / town |  | | | |
| Telephone no. |  | VAT registered | Yes | No |
| Bank account |  | | | |
| Bank/branch |  | | | |
| Insurer |  | | | |
| Policy number |  | | | |

## Insured event

|  |  |
| --- | --- |
| Fire insurance | (Fire, Lightning, Natural Hazards) |
| Theft insurance | (Burglary, Robbery) |
| Water damage insurance | (Mains water, rain, snow, melt water, flooding or ground water) |
| Glass breakage | (Plate or other glass) |
| Insurance of valuables | (Damage to or loss or valuables) |
| Interruption losses | (as a result of a fire, water or theft loss) |

## Loss occurrence

|  |  |  |  |
| --- | --- | --- | --- |
| Date: |  | | |
| Time: |  | | |
| Town and street |  | | |
| Was any official report made of the facts? | | Yes | No |
|  | | | |
| **If so, by whom?** | | | |
|  | | | |
|  | | | |
| **Circumstances of the loss:** | | | |
|  | | | |

Please continue on a separate sheet if necessary.

## Witnesses

|  |  |
| --- | --- |
| Full names |  |
| Tel. nos. |  |
| Address |  |

## Questions relating to fire, water and valuables insurance

|  |  |  |
| --- | --- | --- |
| * What recovery measures have already been taken? | | |
|  | | |
| * Where can the damaged property be inspected? | | |
|  | | |
| * Is anyone responsible for the loss? | Yes | No |
| Who?: | | |
| * Is there any reservation of title or lien in respect of the insured building/property? | Yes | No |
| (If so, in whose favour?) | | |
| * Was the fire brigade called or any other assistance called for? | Yes | No |
| (If so, what?) | | |
| * Has the loss resulted in an insured interruption of the business? | Yes | No |
| (If so, expected duration?) | | |

## Question relating to theft and valuables insurance

|  |  |  |
| --- | --- | --- |
| * How did the thief gain access to the loss location? | | |
|  | | |
| * Was the stolen property under lock and key? | Yes | No |
| (If so, describe the containers) | | |
| * Has the loss resulted in an insured interruption of the business? | Yes | No |
| (If so, expected duration?) | | |

## Schedule of loss

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Qty.** | **Object** | **Date of purchase** | **Purchase price** | **Stolen/** | **Qty.** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

## Is the above property covered by any other insurances?

|  |  |
| --- | --- |
| Fire | Theft |
| Glass breakage | Water damage |
| Machinery breakdown | Construction |
| Company? |  |

## Comments

|  |
| --- |
|  |
|  |
|  |
|  |
|  |

The policyholder authorises the insurance company stated on page 1 to inspect the official records.

|  |  |
| --- | --- |
| **, 23 December 2013** | |
|  | |
| The client | |
|  |  |