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# Property Claim Form

## 1. AGENCY DETAILS

Agency Name ..... Phone .....

Postal Address ..... Fax .....

Risk/Cost Centre .....

## 2. DETAILS OF INCIDENT

If previously reported to RiskCover, provide Incident No .....

Incident Date ..... / ..... / ..... Time ..... am / pm

1. Was it discovered during stocktake? Yes  No

2. Where did it occur? .....

3. Describe the events of the incident: .....

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4. Describe the loss or damage: .....

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5. Who is or what was considered to have caused the loss or damage? .....

Why? .....

.....

.....

6. If you consider any person(s) responsible for the loss or damage, please provide person(s)

Name ..... Address ..... Phone .....

Name ..... Address ..... Phone .....

If faulty manufacture or workmanship contributed to the loss or damage, provide details: .....

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7. Who owns the property? Agency  Private  Leased  On Loan

If private, was the property being used for business related purposes? Yes  No

8. Did the person have the Agency's authorisation to use the private property? Yes  No

9. Was the theft or malicious damage reported to the Police? Yes  No

If Yes, provide the Police Station and Police Offence Report Number .....

10. If repairs have been carried out, who should be paid? .....

(please attach the repairer's report, quotations, invoices and any technical reports to this form)

11. Provide details of precautions taken to avoid further loss or damage: .....

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12. Is there any other insurance covering the lost or damaged property? Yes  No

If Yes, provide name of Insurance Company and Policy Number .....

## 3. WITNESS DETAILS (to the loss or damage)

Name	Address	Daytime Contact Number
.....	.....	.....
.....	.....	.....

Please complete other side of form

