

Commercial Property Claim Form

1. Name, Address & Tel No. of the Assured	

2. Policy Number		3. Renewal Date	
4. Broker / Agent			

5. Type of Business			
6. Are you a registered trader for VAT Purposes		Yes / No	
7. If Yes, please state whether you can recover the VAT relating to the property for which you are claiming		Completely Partially Not at all	(Delete as necessary)
8. If you can recover only partially, indicate the reason and percentage recovery			
9. If you cannot recover any tax, state the reason			

10. Address or location where the loss occurred	
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11. Date & Time of Loss	
12. Give details of circumstances giving rise to loss or damage. (If FIRE give the exact cause of outbreak). If damage caused by a Third Party e.g tradesman please give name and address.	

13. Please describe the type of Premises	
14. When & by whom was the loss or damage discovered?	

15. Name & Address of any witnesses	
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16. Are you the owner of the premises?	Yes / No
If you are NOT the owner, are you responsible for repairs and if so please state why.	
17. Have you previously sustained loss or damage of this nature? If so, please give details.	

18. Is the property for which you are claiming insured under any other Policy? If so give details of Insurers and Policy No.	
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Please Complete this section in all cases of Theft, or Malicious Damage

19. When and at which station were the Police Notified?	
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20. If theft, was there forcible and / or violent entry to or exit from the premises? If so, please give details	
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21. If premises unoccupied, please state date and time they were last occupied	
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22. Are the premises protected by an alarm? If so, please confirm whether it operated in the correct manner also is there any maintenance contract in place for the alarm.	
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