



**PHOENIX**

INSURANCE BROKERS PTY LTD  
ABN 40 009 419 872

20 Lyall Street  
South Perth 6151

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South Perth 6951

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## Fire, Impact, Storm & Tempest Insurance Claim

The issue of this form does not constitute an admission of liability on the part of the insurer.

Full Name

Address

Postcode

Bus Phone  Private Phone  Fax No.

Occupation/Bus/Industry/Trade

Name any other interested party  How interested

Address

Postcode

Policy Number  Due Date

Is there any other Insurance in force which would cover this in whole or part Yes ☐ No ☐

If Yes, please advise in the space provided

Insurer's Name

Policy Details

What is your Australian Business Number (ABN)?  -  -  -

Are you registered for GST? Yes ☐ No ☐

To what extent are you entitled to claim an Input Tax Credit on the GST applicable to the premium?  %

## Details of Loss Damage Or Occurrence

Date of Loss / Damage / or Occurrence

Time

When was it reported to you (if applicable)?

Time

Place and/or premises where it occurred

Please state full details of how loss/damage/or accident occurred

Please describe nature of damage or injury

What steps have you taken to minimise the loss?

If Storm & Tempest, through what type of opening did wind, rain or water enter the premises?

Did storm and tempest cause opening to premises?

Yes

☐

No

☐

If Yes, describe the cause

If dividing fence or wall damage give name and address of joint owner.

If damage caused by vehicle, give name & address of owner/driver & vehicle registration number.

## Responsibility/Witnesses

In your opinion was any other person(s) responsible for loss or damage or cause of the Occurrence? If YES, please give full details.

Yes ☐ No ☐

Full Name

Address

Bus Phone  Private Phone  Fax No.

Reasons

Was there a witness or witnesses to this event?

Yes ☐ No ☐

If YES, please give full details

Name of Witnesses

Address

Bus Phone  Private Phone  Fax No.

## Description of property loss or damage

Description	Sum Claimed \$	To assist in assessing the loss the following information is requested.				
		Date of Purchase	From whom purchased	Purchase Price \$	Replace Value \$	*Input Tax Credit %

Total amount claimed

\*Please show the Input Tax Credit you are entitled to claim on the purchase of each item as a percentage of the total GST payable.

## Insurance History

Have you ever previously sustained loss/damage or caused damage or injury to 3rd parties?

Yes ☐ No ☐

If YES, give details of such losses and amounts involved.

Was an Insurance Company involved?

Yes ☐ No ☐

If YES, please state name of company and year of claim

Have you been convicted of any criminal offences in the last 10 years?

Yes ☐ No ☐

If YES, please provide details

## Declaration (must be completed)

1. I/We the insured do solemnly and sincerely declare that I/We have complied with the conditions and warranties (if any) of the policy and have not deliberately caused the said loss or damage or sought unjustly to benefit thereby by any fraud or wilful misrepresentation and that the information shown on the form is true and the I/We have not concealed any information relating to this claim.
2. Further it is understood and agreed that if any property claimed for is subsequently recovered in an undamaged condition I/We will immediately refund the company any sum which may have been paid to me/us in respect of such property. In the event of any property being recovered in damaged condition I/We will immediately hand the same over to the company for disposal as may be agreed.
3. I consent to the broker and insurer using my personal information I have provided on this form for the purpose of processing my claim. I understand that if I choose not to provide the required details, this is my choice, however, the broker and insurer may not be able to process my claim.
4. \*I consent to the broker and insurer disclosing my personal information to other insurers, an insurance reference service, or as required by law. I consent to the broker and insurer also disclosing my personal information to and/or collecting additional information about me, from investigators or legal advisors.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

\* This consent only applies when a claim is submitted in relation to a policy insured to the individual, not a company or business.

## How To Get Quick Action On Your Claim

1. Complete the attached form and return to our office. If an assessor is appointed, give them the forms.
2. Attach all **original** quotations or invoices obtained for replacement of or repair to the damaged or missing property. Photocopies are not accepted as a rule.
3. Attach **original** valuations and receipt of purchases whenever possible.
4. Advise the Police immediately in the event of loss by burglary, housebreaking, theft, suspected malicious damage. Also make sure the premises are secure to avoid further incidents.

**Note:** Police reports are very slow so if you can obtain one at the time the report is taken, then this will save valuable time or at least obtain a copy or report number.

5. Attach any letter of demand or other correspondence that you may receive from any Third Party.
6. Do not make any admission of liability for loss or damage caused by you to the Third Parties.

### WHAT WE WILL DO - IF THE PAPERWORK IS CORRECT AND COMPLETE:-

- Submit the claim form to the Insurer
- If the claim has not been paid within 30 days we will contact the Insurer and then advise you accordingly
- We will then follow up the claim when necessary until settlement is reached, however, please feel free to call at any time

### WHAT AN ASSESSOR WILL DO:-

- An assessor is an independent person who is appointed by the Insurer for their expertise in helping you finalise a larger or more difficult claim
- They will interview and obtain details of a loss and arrange for quotes and prepare the necessary paperwork
- The assessor is your contact point
- The assessor will write a report to the Insurer recommending a course of action
- This can take time depending on their work load and Police Reports
- The Insurer will not act until these reports are received and although not bound by the assessor recommendations, the Insurers usually accept these reports.
- If you are unhappy with any aspect of the claim, advise the assessor. If he is unable to correct the problem then contact us immediately. We will not know of any problem without being advised.
- If you are unhappy with the assessor's responses, contact us immediately.