

## General Claim Form

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

### 1. ABOUT THE INSURED LANDLORD

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Are you registered for GST? \_\_\_\_ Y/N \_\_\_\_ What is your ABN? \_\_\_\_\_

Are you entitled to claim ITC? \_\_\_\_\_ ITC%? \_\_\_\_\_

Was there any other insurance covering this damage current at the time of the occurrence?

Yes/No - Give Details

Name of Insurer \_\_\_\_\_ Policy Number \_\_\_\_\_

Does any other party have an interest in the damaged property the subject of the claim?

Yes/No - Give Details (e.g. Mortgagee, Finance Co., Lessee)

### 2. ABOUT THE PROPERTY MANAGER

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

### 3. ABOUT THE INCIDENT

Date of Incident: \_\_\_\_\_ Time: \_\_\_\_\_ Location: \_\_\_\_\_ State: \_\_ Postcode: \_\_\_\_\_

What happened? (provide as much detail as possible eg. For burglary claims please provide the point of entry, malicious damage claims please detail exactly what damages are being claimed and the room they are in, for water damage claims, please advise where the water has come from, etc.) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please provide the date the premises were last occupied: \_\_\_\_\_

If the damage is the result of fire did the fire brigade attend? \_\_\_\_ Y/N \_\_\_\_

Was the matter reported to the police? \_\_\_\_ Y/N \_\_\_\_

Police Station: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Police report number: \_\_\_\_\_ Date Reported: \_\_\_\_\_

ANY LOSS INVOLVING MALICIOUS DAMAGE, LOST OR STOLEN PROPERTY MUST BE REPORTED TO THE POLICE.

#### 4. ABOUT THE TENANT AND TENANCY

Tenant's Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Forwarding Address: \_\_\_\_\_

#### LOSSOFRENTCALCULATOR:

TOTAL LOSS OF RENT (do not deduct from the Bond)

Lease Start Date:	Lease end date:
Date Tenant Vacated:	Notice Given? Y/N Date?
Rent Amount Per Week	\$
Bond Amount	\$
Rent Paid up to (excluding bond)	
Rent Credit (On Account)	\$
New Lease Agreement Date	

BOND DISPERSAL What was any retained security bond spent on?

Description	Amount
	\$
	\$
	\$
	\$
	\$
Is there any bond credit? Y/N	\$

#### Rent Loss

From:	
To:	
Total Days:	
Rent per day:	\$
Subtotal:	\$
Minus bond credit:	\$
Minus rent credit:	\$
Total loss of rent:	\$

#### Documents to be provided for rent loss claims:

- Copies of all invoices and/or quotes
- Copy of Tenancy Agreement for new tenant and defaulting tenant
- Copy of Application for Tenancy
- Copies of all notices to vacate property by either party
- Copies of all Breach of Condition Notices
- Copies of all legal documents (including Bond Release and any Court Orders and application)
- Substantiation of rental payments for at least 3 months prior to loss
- Copies of initial and final Property Condition Report, and routine reports if applicable
- Proof of advertising

### 5. SCHEDULE OF LOSS

Please complete for loss/damage of property/contents:

Full description of property lost or damaged:	Date of Purchase:	Purchase Cost:	Repair/Replacement Cost:	Total Claimed:
				\$
				\$
				\$
				\$

Supporting Documents required:

- Repair/replacement tax invoices or quotes if repairs/replacement is yet to take place
- Photos of damages being claimed
- Ingoing and outgoing condition reports for property damage claims
- Original purchase invoices, for contents items

Please note: the underwriter may request further information in addition to the above if required.

Claim payment by EFT: Account Number ..... BSB ..... Account Name .....

**DECLARATION**

By ticking this box

I / We and our Property Manager do solemnly and sincerely declare:

1. That the information supplied on this Claim Form and Statement of Claim is true in every respect.
2. I / We understand that the claim may be refused if information is withheld, false, misleading or concealed.
3. That there was no other insurance covering this loss current at the date of this incident.
4. I / We acknowledge that this Claim Form is a Legal Document and such may be used in any legal proceedings resulting from this claim.

Landlord's Name

Property Manager's Name