

## CLAIM NOTIFICATION FORM PROPERTY INSURANCE

### Policy information

Policy number \_\_\_\_\_  
Claim number (if available) \_\_\_\_\_  
Policy holder \_\_\_\_\_  
Address \_\_\_\_\_  
Postal code and Place \_\_\_\_\_  
Telephone number \_\_\_\_\_  
IBAN number \_\_\_\_\_  
Entitled to deduct V.A.T.?  Yes  No

### Information of the incident

Date of loss \_\_\_\_\_ - \_\_\_\_\_ - 20\_\_\_\_\_  
Location of loss (address) \_\_\_\_\_  
Description of the loss \_\_\_\_\_  
\_\_\_\_\_

### Information of the damaged a/o missing objects/items

Objects, brand, type, name	Date of purchase	Purchase price	Estimate of the damage
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

### Repair

Can the damage be repaired?  No  Yes, at a cost of EUR \_\_\_\_\_  
*Attention: please attach repair offer*

Who will make the repairs? Name : \_\_\_\_\_  
Address : \_\_\_\_\_  
Place : \_\_\_\_\_  
Telephone : \_\_\_\_\_

Where and when can the damage be surveyed? \_\_\_\_\_  
\_\_\_\_\_

Has repair already taken place?  No  Yes, at the cost of EUR \_\_\_\_\_  
*Attention: please attach the repair invoice*

## Liability

Who has caused the damage? Name : \_\_\_\_\_  
Address : \_\_\_\_\_  
Place : \_\_\_\_\_  
E-mail : \_\_\_\_\_

Has the damage been caused with a vehicle  No  Yes, with number plate \_\_\_\_\_

## Theft or burglary

Are there signs of a forced entry?  No  Yes, such as \_\_\_\_\_  
Has a police report been filed?  No  Yes *Attention: please attach the police report*

## Contact for the claim

Name \_\_\_\_\_  
Telephone \_\_\_\_\_  
E-mailadres \_\_\_\_\_

## Other

Is there another policy that could provide coverage for this loss?  
 No  Yes, with the following details \_\_\_\_\_

Are there any other facts or circumstances that could be of interest to insurers?

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