

# Notification of Claim

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 Please Complete this Form in Block Capitals

## Insured

Name

Policy No.

Address  Postcode

Tel. No.

Are you registered under the VAT regulations? Yes  No  What percentage can you recover?  %

## Details of insured machine involved in the occurrence

Item No. and Description, including Type No.

Maker and Date of Make

Present Market Value £  New Replacement Value £

Is item owned by the insured? Yes  No

If 'No', give details of owner and if hired in, state from where hired and attach details of hire contract, if applicable.

Was item hired out by the insured? Yes  No

If 'Yes', state to whom and attach copy of the conditions of hire.

## Details of occurrence

Date  Time

Place

What work was the machine doing?

Was machine being used by the insured? Yes  No

Name of operator of the machine

Was operator in the employ of the Insured? Yes  No  If 'Yes', for how long?

Describe how loss or damage occurred **(and show by sketch opposite, where applicable)**

If damage was caused by person not in the employ of the Insured, give their name and address

Name and addresses of witnesses

## Details of loss or damage

Give particulars of loss or damage claimed

## Details of Injuries

Give details of any injuries to any person

## Inspection of Damaged Property

Where can the damaged property be inspected?

## Repairs

What steps have been taken to effect repairs?

Name and addresses of repairers

Postcode

Estimated cost of the repair (please attach repairer's estimate)

£

## Loss in Transit

**For Claims in respect of Loss in Transit, please also answer the following**

Name and addresses of carriers and mode of conveyance

Postcode

Indicate whether consigned at the Carrier's or Owner's risk

How was the property packed?

If damage occurred during loading or unloading, by whom was the operation carried out?

**Important – It is essential that the Insured immediately notifies the carriers that he intends claiming from them.**

Has such notification been given?

Yes

No

## Loss by Theft

**For Claims in respect of Loss by Theft, please also answer the following**

How was the loss discovered and by whom?

Give the date police were advised and the name and address of the police authority concerned

What other steps have been taken to discover the guilty person and to recover the property?

Is the Insured aware of any other insurances (whether or not in the Insured's name) covering the loss or damage or liability?

Yes

No

If 'Yes', give details

## Further Comments and Sketches

I/We declare that this is a full and accurate statement according to my/our information and belief. I/We therefore claim the sum of £  as the amount due to me/us in respect of the loss of or damage to the property detailed.

I/We also declare that no person(s) has/have an interest in the property lost or damaged other than as stated herein.

### Damaged Property

The damaged property should be protected from further deterioration, but should not be disposed of until permission is given by the Company or the Appointed Adjusters.

### Notice

Insurers pass information to the Claims and Underwriting Exchange Register, run by Insurance Database Services Ltd (IDS Ltd) and the Motor Insurance Anti-Fraud and Theft Register, run by the Association of British Insurers (ABI). The aim is to help us to check information provided and also to prevent fraudulent claims. Under the conditions of your policy, you must tell us about any incident (such as accident or theft) which may or may not give rise to a claim. We will pass information relating to this incident to the registers.

### Data Protection Notification

We may use personal and business details you give us, or which are supplied by third parties, to consider your claim, to search the files of credit reference agencies who may keep a record of the search, to carry out such financial and other enquiries as we consider necessary to evaluate the claim and assist in making a decision regarding the claim, and for compliance business reviews. We may also share these details with other insurance organisations and selected other parties to handle claims and prevent fraud. Personal details may be transferred to countries outside of the EU. They will at all times be held securely and handled with the utmost care in accordance with all principles of UK law. We will store such personal details on the computer but will not keep them longer than necessary. Under the terms of the Data Protection Act 1998, individuals are entitled to a copy of all the information we hold about them.

Information may also be supplied to registers of lost or stolen property.

### Very Important – Fraudulent and Exaggerated claims

Deliberately exaggerated claims could invalidate your policy cover. Insurance fraud is a crime and liable to prosecution.

The above answers to our questions will be the basis of consideration of your claim. You must ensure that all information is **true and correct** to the best of your knowledge and belief, and that all material facts have been disclosed. A material fact is one that is likely to influence us in the assessment or acceptance of this claim, or one that is likely to influence our consideration of cover under the terms of your policy.

If you are in any doubt as to whether a fact is material, **you must disclose it.**

**Failure to do this may mean that your policy becomes invalid and a claim payment will not be made.**

I/We understand that you may seek information from other insurers to check the answers I/We have provided. This report is made in the bona fide belief that litigation may ensue and to enable solicitors and/or agents to advise and to conduct such litigation in relation thereto.

Signature of Insured

Date