

Office Package Claim Form

Insured Details

1. Insured entity			
2. Address			
3. Contact Name			
4. Contact number		5. Policy number	
6. ABN		7. Are you GST registered	%

Insurance Broker Details

8. Please provide the details of your insurance broker	
9. Brokerage	
10. Brokers Name	
11. Phone number	
12. Email	

Claim Details

13. What date and time did the loss occur?	
14. When was the loss discovered?	
15. Please provide full details of how the loss occurred?	
16. Are there any other policies that may provide cover for this loss?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Property damage, loss, theft, employee dishonesty, and breakdown claims

17. Please provide a full description of the property lost or damaged.			
Description of property	Date purchased	Cost to replace	Amount claimed
		\$	\$
		\$	\$
		\$	\$
		\$	\$
18. Is the insured the sole owner of the property? If no please provide details			<input type="checkbox"/> Yes <input type="checkbox"/> No
19. Have you lodged a police report?			<input type="checkbox"/> Yes <input type="checkbox"/> No
20. Police station		21. Report number	22. Report date

Include copies of proof of purchase/ownership and replacement quotes for property
 Ensure all burglary, theft and malicious damage is reported to the police
 For breakdown claims include repairers report stating the reason for the breakdown

Glass

23. Where is the glass that has been damaged?	
24. Have you replaced the glass?	

Public and Products Liability

25. Name of the injured party or owner of property damaged	
26. Address of the third party	
27. Phone number of the third party	

28. Were any sub-contractors involve in the incident?	
29. Were there any witnesses? If yes please provide details	<input type="checkbox"/> Yes <input type="checkbox"/> No
30. Has any formal claim been made against you? If yes please provide details	<input type="checkbox"/> Yes <input type="checkbox"/> No

Tax Audit

31. What type of audit have you received notice of?	
32. What date did you first receive this notice?	
33. Name and contract details of your accountant	
34. Has your accountant commenced any work in relation to this audit notice?	<input type="checkbox"/> Yes <input type="checkbox"/> No

IMPORTANT INFORMATION

Minimise loss

You must

- take all reasonable precautions to minimise or prevent further loss, damage, injury or illness; and
- take all reasonable steps to recover lost or stolen property.

Evidence of ownership and value

Please attach receipts, photos or other documents to establish proof of ownership and the value of each item claimed.

Notify claim

You must

- notify the police immediately following a theft or burglary or if any property is misappropriated, lost or maliciously damaged;
- notify us as soon as possible and give us all the known details of the event including the police event number if available;
- immediately send us any legal document or other communication you receive about the event.

Cooperation

You must co-operate with us fully in any investigation, negotiation, defence or settlement of any claim. This may include attending court to give evidence.

Admitting liability

You must not admit liability for any loss, damage or injury, or settle or attempt to settle or defend any claim without our written consent.

Retain all damaged property

You must

- retain and preserve all damaged property for our inspection prior to authorisation of repairs unless alterations and repairs are immediately necessary for safety reasons or to minimise or prevent further loss, damage or injury. If repairs are necessarily carried out without our prior approval, you are still required where reasonably practical, to retain and preserve all damaged property for our inspection; and
- use your best endeavours to preserve all property, products, plant and all other things that may assist us in investigating or defending a claim against you, including assisting in determining if there are rights of recovery against another entity or person.

General Insurance Code of Practice

This insurance complies with the Insurance Council of Australia's General Insurance Code of Practice, apart from any **claims** adjusted outside Australia. Underwriters at Lloyd's proudly support the General Insurance Code of Practice. The purpose of the Code is to raise standards of practice and service in the general insurance industry.

Privacy Policy

IBL Limited, trading as Focus Underwriting (Focus), ABN: 65005754718 & AFSL: 231203, is committed to protecting your privacy in accordance with the Privacy Act 1998 (Cth) and the Australian Privacy Principles. Our Privacy Policy describes our current policies and practices in relation to the collection, handling, use and disclosure of personal information. It also deals with how you can complain about a breach of the privacy laws and how you can access the personal information we hold and how to have that information corrected.

Our contact details for all privacy enquiries are:
Address: Level 21 41 Exhibition Street Melbourne 3000
Phone: 1800 234 338
Email: enquiries@focusuw.com.au
ABN: 65005754718
AFLS: 231203

Complaints

Any complaint relating to this Insurance should be referred to Focus Underwriting
The Complaints Manager
Level 21, 41 Exhibition Street
Melbourne Vic 3000

If this does not resolve the matter or you are not satisfied with the way a complaint has been dealt with, you should contact:

The National Head of Claims
Berkley Insurance Australia
P.O Box Q296 QVB
Sydney NSW 1230

Declaration

I/We declare that we have read and understand the important information set out above. I/we further declare that all information contained in this claim form and statements made in support of this claim are true and correct and that no information relevant to this claim has been withheld.

Signature

Date

Name

Title