

HOUSEHOLD Claim Form



If you need any assistance in completion of this form, please contact the Claims Department on 0844 893 8360 or if you are calling from overseas call + 44 (0) 020 3118 7777.

Section 1 – General

Claim No.

Name _____ Address _____

Work Tel. No. _____ Home Tel. No. _____

Mobile No. _____ Email _____

Date of birth ____ / ____ / ____ Occupation _____

Are You Registered for VAT? YES NO Policy Number _____

If your claim is accepted our preferred method of settlement is by way of electronic transfer using BACS. If you would like to use this payment method please provide your bank details

Alternatively if you would prefer a cheque, to whom should it be made payable? _____

Section 2 – Circumstances of loss/damage

Please complete for all claims

Date of Occurrence ____ / ____ / ____ Time of Occurrence _____

Where did the loss/damage occur? _____

Was your home occupied? YES NO If NO, how long had it been unoccupied prior to the Loss? _____

Have you suffered any other losses during the past 5 years? YES NO

If YES please give details _____

Do you hold any other insurance which may cover this incident (e.g. travel insurance)? YES NO

If YES please provide details as follows: Insurer _____

Policy Number _____ Tel. No. _____

Please state exactly how the incident occurred _____

Section 3 – Accidental loss/theft/malicious damage claims only

How was entry gained? (Theft claims only) _____

Reported to Police on ____ / ____ / ____ Police Reference No. _____

Police Station Address _____

(Note: Claims for Accidental Loss, Theft or Malicious Damage MUST be reported to Police)

If a theft occurred from the Insured Address:

a) is the property let, lent or sublet? YES NO

b) is the property protected by a burglar alarm? YES NO

If the answer to b is YES, did the alarm operate? YES NO

