

Reference

# Loss or damage report form - Commercial

(For Theft claims use Theft claim form)

Please complete and return this form. Each question should be answered as fully as possible.

## Policyholder

Name

Address

  

Postcode

Policy no.

Date premium paid

Telephone no: Home

Business

Occupation

V.A.T. Registration no.

(if not registered, state "none")

## Loss or Damage

Date of loss or damage

Where did the loss or damage occur?

Describe fully the circumstances in which the loss or damage occurred

  

## General Information

For what purpose were the premises occupied at the time of loss?

Are you the sole owner of the property? Yes

No

If 'No', give the names of other interested parties

In the case of damage to the buildings, or permanent fixtures or fittings, are you the owner, mortgagor or tenant?

Is there any other insurance(s) covering the property? Yes

No

If 'Yes', give the name and address of the insurers

## Contribution

Some of the information which you give us about this claim may be passed to other insurance companies you tell us about. They will give us information about your policy with them, and we may ask them to pay a contribution to this claim. A contribution payment is normal practice where two or more policies cover the same thing. If another company contributed to your claim with us, it should not affect any no claim discounts you may have with them.

Have you ever before suffered damage to these or other premises? Yes

No

If 'Yes', please give details

Please state below the full value of all the property insured immediately prior to the loss

Buildings

£

Contents

£

## Other Parties

Is any other party thought to be responsible for the loss?

Name and address of police authority to whom the incident was reported

Date and time of report

Please turn over



NFU Mutual

