



CONSEQUENTIAL LOSS CLAIM FORM

NOTE: i- The Issue of the Form does not imply admission of liability.
ii- The Participant is requested to answer all questions fully and return without delay Dashed are insufficient

PART A: POLICY DETAILS

POLICY NO:

PART B: PARTICIPANT DETAILS

FULLNAME:

ADDRESS:

TELEPHONE:

OCCUPATION/
BUSINESS :

PART C: DETAILS OF PLANT/MACHINERY LOST OR DAMAGED

i- Item No:

ii- Make:

iii- Registration No:

iv- Year of manufacture:

v- Date of Purchase:

__ / __ / ____ format dd/mm/yyyy

vi- Deduction for age,
use and/or wear tear :

vii- Sum claimed for:

viii- Present value:

Authorized and Regulated by:



Member of:



PART D: OTHER DETAILS

i- When was the loss/damage? Time: __: __ am/pm format HH:MM Date: __/ __/ ____ format dd/mm/yyyy

ii- When, where and by whom the property was last seen intact;

(a) When: Time: __: __ am/pm format HH:MM Date: __/ __/ ____ format dd/mm/yyyy

(b) Where:

(c) By whom:

iii- Where loss/damage occurred:

iv- Parts damage and extent:

v- When Plant/Machinery may be seen:

vi- Please give FULL account of circumstances in which loss/damage was sustained:

vii- State here any suspicious or information as to the person/s or parties responsible for the loss/damage:

PART E: DECLARATION

I hereby declare that the within mentioned property belonging to me and covered under the said Policy was lost, damaged or stolen in the circumstances stated above and that in consequence thereof a claim is hereby made for the sums severally state within; and I further declared that no other person except.....has any interest in the said property.

Witness my hand this day of20

Witness Signature

N.B This Statement of claim should be completed and forwarded to the company. The Participant **MUST** at once take every practical step that may lead to the recovery of the property.

Authorized and Regulated by:



Member of:

