



1. Insurance Company:

2. Policy Number:

Expiry Date:

3. Insured (surname, company, partnership):

Given Name(s) of Insured:

Contact Person (for company or partnership):

4. Address:

Suburb:

Postcode:

5. Mobile No:

Business Telephone No:

Email Address:

6. Are you registered for GST purposes?

No

Yes

What is your ABN?

7. When did the loss, theft or damage happen?

Date:

Time:

 AM  PM

8. Please describe what happened:

9. Address where loss, theft or damage happened:

Post Code:

Are you the only occupier of your premises?

Yes

No

Please give details:

10. Who discovered the loss, theft or damage?

Name:  Date:  Time:  AM  PM

11. Do you know who is responsible for the loss or theft of, or damage to your property?

No  Yes  Name(s), address(es) and any other information about the person(s) responsible:

12. Were there any witnesses to the loss, theft or damage?

No  Yes  Name of Witness & Address:  Telephone No:   
Name of Witness & Address:  Telephone No:

13. Tenancy Information

1. Has the term set out in the original lease to the tenant expired?

No  Yes

2. If a new lease has not been agreed and signed, is the tenant occupying the premises under a Periodic Tenancy Agreement?

No  Yes  attach details of any agreement whether written or verbal.

3. Has the tenant given you or your agent notice of intention to vacate?

No  Yes  attach documentation with claim

4. Have notices to vacate been issued to the tenant?

No  Yes  attach documentation with claim

5. Has a claim been lodged with the Tribunal?

No  Yes  attach documentation with claim

6. What date did the tenant move into the premises?

7. What date did the tenant vacate/or return the keys?

8. What date did the tenant pay their rent to?

Bond on premises

Weekly rent

9. Has the Bond been claimed?

No  Yes  Why Not?

10. Have the premises been re-let?

No  Yes  Why Not?

\*the Residential Tenancy Agreement must be attached.

14. Rent Default Claim

Loss of Rent for period

From  to  @ Weekly rent =

Less Bond

Deduct from Bond cleaning and re-letting expenses as indicated below

| Item | Amount | Your available input tax credit | Net expense to be deducted from Bond | Total |
|------|--------|---------------------------------|--------------------------------------|-------|
|      |        |                                 |                                      |       |
|      |        |                                 |                                      |       |
|      |        |                                 |                                      |       |
|      |        |                                 |                                      |       |
|      |        |                                 |                                      |       |
|      |        |                                 |                                      |       |
|      |        |                                 |                                      |       |

\*You must report any loss, theft or vandalism of property to the police.

The insurance company may need to apply to the police for a copy of this report.

15. Name of police station where you report it:

Name of police officer:

Police Report No:

Date Reported:

\*Please complete the attached description of items checklist attached separately.

16. Have you had any previous losses or made any claims for loss, theft or damage with any insurer in the past 5 years?

No  Yes

Please give details:

17. Has any insurer refused or cancelled cover or had special conditions on your cover?

No  Yes

Tell us what happened:

18. Have you been charged with, or convicted of any criminal offence in the last 10 years?

No  Yes

State Details:

**Signature**

**Date**

[Click here to learn how to digitally sign this document](#)