

# **PROPERTY CLAIM FORM**

It is important that a complete answer be given to every question. If insufficient space is provided for your answers, please continue on a separate sheet.

POLICY NUMBER

NAME OF AGENT

#### WHAT TO DO IN THE EVENT OF A CLAIM

- 1. Attach all quotations obtained for replacement or repair to the damaged or missing property.
- 2. Attach valuations and receipt for purchases whenever possible.
- 3. Advise Police immediately in the event of loss by Burglary, Housebreaking, Theft, Suspected Malicious Damage or Baggage Loss.
- 4. Attach any letter of demand or other correspondence that you may receive from any Third Party.
- 5. Do not make any admission of liability for loss or damage caused by you to Third Parties.

INSURED OR POLICYHOLDER			
Full Name			
Private Address			
	_ Tel No	Fax No	
Business Address			
	- Tel No		
Occupation / Business			
CIRCUMSTANCES OF LOSS OR DAMAGE			
Nature of loss or damage			
Date and time			
Place where the event occurred			
State fully what happened			
When and by whom discovered			
If known, state name and address of			
person causing the loss or damage			
POLICE			
Where particulars taken by or reported to the police	2		YES/NO*
If YES, (a) give name of Station (c) attach a copy of their report.	(b) Police report no		
*DELETE AS REQUIRED			CL-1 06/06
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		DETA	ILS OF	PROPERT	Y LOST OR DA	AMAGE	
	the prope and the e	rty lost xtent of	or the	Date acquired	Cost Price	Value at the time of loss	Net amoun of claim
- -							
						• 100117 • • • • • • • • • • • • • • • • • •	
What is the	value of all t	the proper	y insure	d by this Policy	/?		
Do you own	the property	y?					YES/NC
If No, give n	ame and ad	dress of th	ne owne	r			
Is the prope	rty subject to	o a hire pu	rchase o	or loan agreem	ent?		YES/NC
If YES, give	name of the	e finance o	r lending	g company, the	eir address and ag	reement number	
	ww					,	
Was the pro	perty on loa	n or hire to	o anothe	er party?			YES/NC
If YES, give	name and a	address of	party _		- -		
Is any other	party intere	sted in the	propert	y?			YES/NC
If YES, give	name of the	e party and	extent	of interest			
		aaroomon	t for the	property?			YES/NC
Are you resp	ponsible by	agreemen		F F J .			

# **GENERAL QUESTIONS**

Is there any other insurance on the property?	YES/NO*
If YES, give details	
Have you ever made a claim of this nature on any insurer or underwriter?	YES/NO*
If YES, give details	
Additional Questions if the loss occurred indoors	
State the nature of the occupancy of the premises	
Were the premises occupied at the time of the loss?	YES/NO*
If NO, give date and time they were last occupied	
If entry was illegal, how was it obtained?	
Additional Questions for glass breakage claims only	
Size of broken glass	· · · · · · · · · · · · · · · · · · ·
Type of glass	
Situation (e.g. door, window, showcase, etc.)	
Was the glass sound before the breakage?	YES/NO*
Do you wish the reglazing to be deferred until further notice?	YES/NO*

### \*DELETE AS REQUIRED

# DECLARATION

I/We declare that these particulars are true to the best of my/our knowledge and belief. In accordance with the provisions of the Personal Data (Privacy) Ordinance of Hong Kong, by signing below, I/we consent that the personal information collected or held by ING General Insurance Company Limited (whether contained in this Application or otherwise obtained) is provided and may be disclosed to individuals or organisations within or outside of Hong Kong for the purpose of administration of claim or analysis of it.