

# claim form

## landlord residential building

Policy Number

Claim Number

**If the property damage or theft will exceed \$2,000, you must call Terri Scheer Insurance Pty Ltd. We may then appoint a loss adjuster. Failure to follow this guideline may result in your claim being reduced or declined.**

Real Estate Agent: .....

Telephone No.: ..... Facsimile No.: .....

Full name of Landlord: .....

Telephone No: ..... Email: .....

Preferred Contact  Real Estate Agent  Landlord

Address of Property where loss or damage occurred: .....

Details of other insurances on the property: .....

Tax Status: Registered Business  YES  NO ABN: ..... Taxable %: .....%

### Type of Loss (tick appropriate box)

- |   |                                       |  |
|---|---------------------------------------|--|
| <input type="checkbox"/> Glass                        | <input type="checkbox"/> Fire & Storm | <input type="checkbox"/> Accidental Damage |
| <input type="checkbox"/> Malicious Damage to Property | <input type="checkbox"/> Impact       | <input type="checkbox"/> Other             |
| <input type="checkbox"/> Legal Liability              | <input type="checkbox"/> Theft        | .....                                      |

When did the loss occur? At ..... o'clock am/pm on ..... the ..... day of .....

Who discovered the loss? ..... When? .....

Description of loss: .....

.....

.....

.....

.....

### Third Parties

Do you know who was responsible for the damage?  YES  NO

Name of third party: ..... Phone No.: .....

Address: .....

..... Postcode: .....

Other details (eg. registration no.) ..... Date of Birth: .....

Is the person who caused the damage the current tenant?  YES  NO

If yes: Lease Term From : ..... To: ..... Date tenant vacated: .....

### Police Details

Have the Police been notified? (All Burglary/Theft/Malicious Damage claims must be reported)  YES  NO

Police Station: ..... Reporting Officer: .....

Police Report No.: ..... Date Reported: .....

**Property Damage** If insufficient space please attach a list

Invoice Details	Name of Repairer	Amount Claimed
.....		
.....		
.....		
.....		
.....		
.....		

(If damage caused by your tenant/guest, the amount claimable will be reduced by the bond credit.)

Bond \$ ..... (A)

Allowable Bond Deductions (Please ensure invoices are attached)

<b>SUB TOTAL</b>	
less excess	
less bond credit (C)	
<b>TOTAL CLAIM</b>	

..... \$ .....

..... \$ .....

..... \$ .....

..... \$ .....

..... \$ .....

..... \$ .....

..... \$ .....

Total Deductions \$ .....

Bond Credit = (A-B) \$ .....

**Loss of Rent**

Date property became untenable: .....

Date property tenable: .....

Weekly rent: \$..... Date rent paid up to: .....

Loss of rent from: .....to:.....days  \$ .....

**Checklist**

Please ensure that the following are submitted with your claim:

- Quotes and invoices for repairs
- A copy of the tenant lease (if claiming for damage by tenant)
- A copy of the entry condition report (if claiming for damage by tenant/guest)
- Photos of the damage
- Evidence of rental payment (if loss of rent is being claimed)

**Declaration:**

I do hereby solemnly and sincerely declare the foregoing statements and particulars to be true and correct and I make this true and solemn declaration by conscientiously believing the statements and particulars contained herein to be true in every particular.

Date at .....this.....day of .....

Signature .....Name in full .....