# **Claim form**



The Specialists in Strata and Community Title Insurance

CHU Underwriting Agencies Pty Ltd (AFS Licence No: 243261) is an underwriting agency acting on behalf of the insurer: QBE Insurance (Australia) Limited ABN 78 003 191 035 (AFS Licence No: 239545)

To ensure prompt attention to your claim, please supply information as requested below. When completed, please return this form to the CHU office in your State together with any supporting documentation relevant to the claim, ie: quotations/invoices etc.

## The insured

Name		Policy No	
Address			Postcode
Phone W		н	
Particulars of loss	5		
What happened? (Brief	explanation)		
Date of Loss			
Was the property owne	ed by you? Yes 🗌 No 🗌 If not, by	whom?	
Was the loss reported t	o Police? Yes 🗌 No 🗌 (The Police	e <b>must</b> be notified when pro	perty is lost, stolen or maliciously damaged)
Police Station	Officer's Name		Date Reported
Is there any other insur	ance on the property? If so, please p	provide details of the Insurer	(s) and the policy number(s)

## Third party

If your property was stolen or damaged, do you know who is responsible? Yes $\Box$	No 🗌	
If yes, please provide details		

## **Plumbing repairs**

If your plumber has not already done so, please ensure the following information is provided on the account/invoice.

- i Nature and cause of leak
- ii Composition of pipe (ie: Gal, Copper, PVC, etc)
- iii Procedures undertaken
- iv Details of charges including hourly rate, number of persons on the job (if more than one person in attendance, please explain the necessity for additional person), and details of costs associated with
  - a Search and find
  - **b** Plumbing repair
  - c Reinstatement

## New South Wales

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# Electrical damage (fusion)

Nature and cause of damage (Brief explanation)				
What does the motor operate?				
Horse power/kilowatt rating				
Date of purchase				
Age of appliance/motor				
ls it under manufacturer's warranty?				

## List of articles lost or stolen or damaged

Please complete this section of the claim form to describe lost, stolen or damaged article and state the amount which is being claimed under the Policy.

Description of property or article lost/stolen, damaged, or destroyed	Date of purchase	Original purchase price	Replacement purchase price	Amount being claimed

If there is not enough space on this form, please attach a separate sheet and include the above information for each article.

## General

1	Is the insured registered for GST?	🗆 Yes 🗌 No
2	To what extent is the insured entitled to claim input tax credits?	%
3	Please write the Australian Business Number (ABN) here	

## Declaration

I hereby declare the answers to all the questions on this claim form and the description of the property lost or damaged are true and correct and that I have not concealed anything of which the Underwriter should be aware.

Signed