



ALL RISKS POLICY CLAIMS FORM

NOTIFICATION OF LOSS UNDER ALL RISKS POLICY NO. _____
(To be filled in by Insured)

I, _____
of _____

being insured under the above mentioned Policy, do hereby declare that at or about
_____ o'clock, on _____ the _____ day of _____ 20_____

a loss occurred to the best of my knowledge and belief in manner following:-

- 1. a) Date Police advised of loss (a) _____
b) Name of Police Station (b) _____
- 2. What other steps have been taken for the recovery of the property lost _____
- 3. Have you any reason to suspect any person in connection with the loss? _____
- 4. Is the property lost insured under any other policy against Fire, Theft or "All Risks"?
If so, give particulars _____
- 5. Have you ever sustained a loss by Fire, Theft or any other risk covered by your Policy? If so, give particulars _____

Any I further declare that the Property enumerated on the other side, and insured under the said Policy, was lost, stolen or damaged, and that the amounts severally stated represent the sum I am entitled to claim, in terms of the Policy.

I also further declare that no other person has an interest in the said Property, whether as Owner, Mortgagee, Trustee or otherwise, and that it is not otherwise insured, except as herein stated.

Signature of the Claimant: _____

Date: _____

