



Name of Housing Association _____

Policy number (if known) _____

Your full name _____

Correspondence address _____

Postcode: _____

Telephone number _____ Mobile _____

Email Address _____

Occupation _____

Are you the (tick as appropriate) Leaseholder Shared Owner Owner Factored

Address of property where damage occurred _____
Postcode: _____

Type of property (e.g. house, flat) _____ Age of Property _____

How long have you owned the property _____ Yrs _____ months

Date damage occurred _____

What happened to cause the damage _____

Details of damage including estimated repair cost _____

We require two written estimates. If you are not attaching two estimates, please explain why

Name and address of person responsible for damage (if applicable) _____

Postcode _____

Crime Reference Number _____

(This is a policy requirement for all vandalism / malicious damage / theft related claims)

Was the property occupied at the time of the loss? YES / NO

If no, state the last date on which the property was occupied _____

Have you made any other claims in the past 3 years? YES / NO

If so, please provide details (continue overleaf if required) _____

I/We declare that all the answers provided are true and correct to the best of my/our knowledge.

Signed _____ Date _____

PLEASE RETURN TO: Arthur J. Gallagher, 27-30 Railway Street, Chelmsford CM1 1QS