



Notification of Loss - Property

Fire Wind Glass Burglary Water Machinery Other

Information regarding the Policy/Policy holder

Policy No.	
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Policy holder		
Contact person		
Email	Telephone	Fax
Company registration No./Social security No.	VAT	

Postal address (street, box)	Bank details <i>for Claim settlement</i>
Visiting address	
Postal code and City	

Location where Loss occurred

Street and No.	City	Country
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Loss Description

When did the Loss occur? Year Month Day Time	Where? (Premises etc.)
How did the Loss occur? (Describe the course of events, cause of fire, method of break-in etc.)	
Is anybody at fault for the loss? If Yes, please explain. <input type="checkbox"/> Yes <input type="checkbox"/> No	
Has the Loss been reported to the Police? (In case of Theft, the police Report should always be enclosed) <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are any other insurances affected by this Loss? If so, please state them.	
Were the objects Leased property? <input type="checkbox"/> Yes <input type="checkbox"/> No	The name of the Leasing company
The Leasing company's insurance company	The Leasing company's Policy No.

