

Homeowner's Claim Form

A. Policy Holder/Insured Person/Beneficiary Information

Policy No.:			
Name:			
Address:			
		Postal Code:	
Phone No.:		Mobile No.:	
Email Address:			

B. Loss Information

Date of Loss:		Cause of Loss:	
Location of Loss:			

Loss Description:

Witness Name:		Phone No.:	
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Any other relevant information:

C. Payment Details

In the event my claim is payable by Chubb, I authorise and request Chubb to arrange for payment as follows:

Electronic Funds Transfer (for payments in SGD and to bank accounts in Singapore)

Payee Name (as per bank account name):			
Name of Bank:			
Branch Code No.:		Account No.:	

Cheque Payment (cheque payments will take longer than Electronic Funds Transfer due to postage)

Payee Name (as per bank account name):			
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If no name is provided, settlement will be effected to the payee as provided for under the terms of the policy.

Chubb shall not be liable for any loss incurred by you as a result of you providing Chubb with incorrect bank account details for the payment of your claim.

D. Any Other Insurance

Are there any other insurance policies in force covering you or the subject matter in respect of this event? Yes No

If Yes, please specify below:

Name And Address Of Insurance Company(s)	Policy No(S).

Are you claiming under any of the policies listed above? Yes No

E. List of Claims

Description of property lost or damaged	Quantity	Original Purchase Price (\$)	Purchase Date	Amount Claimed (\$) (If Applicable)
Total amount claimed				

E. Declaration

By signing this form, I agree that Chubb will use the information supplied here and during the formation and performance of the policy, for policy administration, customer services, claims handling and fraud analysis and prevention, and that Chubb may disclose such information to its service providers, agents, authorities and other parties for these purposes.

I authorise any person or entity to provide to Chubb or its authorised representatives, any and all information with respect to any loss and claims, police records, investigation status and results, and such personal information as Chubb in its absolute discretion considers relevant for its assessment of this claim. A photostatic copy of this authorisation shall be considered as effective and valid as the original.

I do solemnly and sincerely declare that the foregoing particulars are true and correct in every detail and I agree that if I have made or in any further declaration or representation shall make any false or fraudulent statements or suppress, conceal or falsely state any fact whatsoever the Policy shall be void and all rights to recover thereunder in respect of past, present or future claims shall be forfeited.

Name of Claimant:			
Signature of Claimant:		Date:	

Please click to submit your claim form

Submit

About Chubb in Singapore

Chubb is the world's largest publicly traded property and casualty insurer. Chubb Insurance Singapore Limited, via acquisitions by its predecessor companies, has been present in Singapore since 1948. Chubb in Singapore provides underwriting and risk management expertise for all major classes of general insurance. The company's product offerings include Financial Lines, Casualty, Property, Marine, Industry Practices as well as Group insurance solutions for large corporates, multinationals, small and medium-sized businesses. In addition, to meet the evolving needs of consumers, it also offers a suite of tailored Accident & Health and Personal & Specialty insurance options through a multitude of distribution channels including bancassurance, independent distribution partners and affinity partnerships.

Over the years, Chubb in Singapore has established strong client relationships by delivering responsive service, developing innovative products and providing market leadership built on financial strength.

More information can be found at www.chubb.com/sg.

Contact Us

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