

**Notification of Loss or Damage for
Electronic Equipment Insurance**

Claim No.:

Policy No.:

The issuing of this form is not to be taken as an admission of liability by the Insurers.		
1. Name and address of Insured	<hr/> <hr/> <hr/>	
Address of plant	<hr/> <hr/> <hr/>	
Name of chief engineer or plant manager	<hr/> <hr/>	
Nearest railway station/airport	<hr/> <hr/>	
2. When did the loss or damage occur?	Time: <hr/>	Date: <hr/>
When was notice first given to the Insurer?	To whom? <hr/>	
	By whom? <hr/>	
3. Are there any witnesses? <input type="checkbox"/> yes <input type="checkbox"/> no		
If so, please give names, professions & addresses. <hr/> <hr/>		
4. Which item was damaged?		
Item No in Specification of Policy Schedule	<hr/>	
Sum Insured	<hr/>	
Name of manufacturer, type of machine	<hr/>	
Year of manufacture, serial number (Please give full details as on manufacturer's plate.)	<hr/>	
Description of damaged item (capacity, rpm weight, etc)	<hr/>	
Had the manufacturer's guarantee period for the damaged item expired? <input type="checkbox"/> Yes <input type="checkbox"/> no		
If so, when? <hr/>		

If more than one schedule item is affected, please complete one form per item.

5.	Which parts were damaged?	
6.	How did the damage occur and what was its probable cause?	
	Please attach sketches, photos, etc.	
7.	Do the fractures show any sign of faulty casting, faulty material or previous repair?	<input type="checkbox"/> yes <input type="checkbox"/> no
	If so, please give details.	
8.	Are any alterations to or improvements of design, construction or material being effected whilst repairs are being made?	<input type="checkbox"/> yes <input type="checkbox"/> no
	If so, please give details.	
9.	How will the damaged items be repaired, by whom and where?	
	Please indicate estimated repair period.	
10.	What are the estimated repair costs? ²	
11.	Was any third party or surrounding property damaged?	<input type="checkbox"/> yes <input type="checkbox"/> no
	If so, please give details.	
12.	Remarks:	

² Please enclose copy(ies) of repair estimate(s), which should show a breakdown into material costs, labour charges-including man-hours worked-and freight charges.

The undersigned Insured declares that he has answered the above questions conscientiously and truthfully.

Issued at _____ this _____ day of _____ 19____
 Signature _____