MEDIA PRODUCTION INSURANCE

PROPERTY CLAIM FORM
Before any question is answered read carefully the declaration at the end of this claim form which you are required to sign. Answer all questions in full. Tick Yes/No boxes.

1. Insured

2. Address (for correspondence)

   [Details]

   Post Code:

   Telephone Number
   Home: Work:

3. Policy/Certificate number

4. Date of the loss or damage

5. Location of the loss or damage

6. State how the loss or damage occurred with details of witnesses

   [Details]

   (Continue on a separate sheet if necessary)

List all lost or damaged items in the schedule at the back.
7. Have the police been notified?  
Yes ☐  No ☐

If Yes, give the station and date of notification

8. Has any other person an interest in the property concerned?  
Yes ☐  No ☐

If Yes, give full details including copies of any relevant hire or rental agreements

(Continue on a separate sheet if necessary)

9. Is there any other insurance covering the property concerned?  
Yes ☐  No ☐

If Yes, give details

(Continue on a separate sheet if necessary)

10. Are you registered for VAT?  
Yes ☐  No ☐

If Yes, give status
**DECLARATION**

I hereby declare that the details given on this form are true and complete to the best of my knowledge.

Signature on behalf of insured: ___________________________ Date: __________

Please supply estimates/invoices where appropriate.

<table>
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<tr>
<th>Description of item(s) lost or damaged</th>
<th>Name of the owner if not the policy/ certificate holder</th>
<th>Date when item(s) was acquired or received</th>
<th>Cost price</th>
<th>Amount claimed</th>
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