

## Tokio Marine Insurance Singapore Ltd.

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## Fire - Property Claim Form

The issue of this form is not to be taken as an admission of liability by the Insurers. It is important that a complete answer be given to every question. If insufficient space is provided for your answers, please attach a separate sheet.

Name of D	alieuh alden .						
	olicyholder :				Tol No.:		
Policy No :					Tel No : Email :		
Residentia	i Address.						
Pusiness /	\ddraga :						
Business Address :					Tel No : Occupation/Business :		
					Occupation/t	ousiness	
State fully what happened : Date : Time:					Place of occurrence :		
Nature of Loss or damage :					Who discovered this loss/damage :		
				Date discovered:			
The Police	ow who cause this damage e must be informed immedi ort if applicable. Name of p	ately if the p	roperty has	been lost, stolen o	r maliciously d	amaged. Pl	ease attach a copy of
	oremises occupied at the tir date and time they were la						
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Quantity	Description	Date Acquired	Cost Price	Value at the time of loss (Replacement Cost, if Building)	Amount of damage sustained	Value of salvage	Net amount of claim ie difference between amounts in (6) & (7)

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What is the total value at the time of the loss of all the property insured by this policy?					
Do you own the property? □Yes □No If No, give name and ac	dress of the owner:				
Is the property subject to a hire purchase or loan agreement? I company, their address and agreement number:					
Is any other party interested in the property? □Yes □No. If Yes	s, give name of party and extent of interest :				
Is there any other insurance on the property? ☐Yes ☐No If `Company Policy No Sum Insure	If interest covered is different from				
Have you ever before sustained loss of this nature? □Yes □No  Have you ever made a claim of this nature on us or on any other ins					
<u>Declaration</u> : I/We hereby declare that these particulars are true to manner caused the loss nor by any fraud or misrepresentation souliberty to deny liability in part or in full if the above written answers a	ight to benefit thereby.				
Signature & Company Stamp of Insured  Date of Insured					
Name : De	signation:				

## **NOTES**

- 1. Wherever possible, claims should be accompanied by Builders', Architects' or Repairers' estimates.
- 2. A Fire Policy being a contract of Indemnity, no profit should be included to support amount claimed.
- a) Claims in respect of Building should be based upon the cost of restoring them to the condition they were in at the time of the loss. Contemplated improvements must not be included.
  - b) Claims for Furniture, Fittings, Machinery, Tools, Electrical Appliances, etc., must not exceed their value at the time of the loss; that is, after due allowance has been made for age, wear and tear and depreciation during the time they have been in use. Where appropriate, the claim will be based on the cost of repairs or of restoration.
  - c) Claims for Stock-in-Trade should be based on values at the time of the loss after deduction of all discounts or allowances. Due allowance must be made for out of date and unsaleable stock.
- 4) Completed Form and Documents should be return not later than 14 working days from date of occurrence.