



**Tokio Marine Insurance Singapore Ltd.**

Company Reg. No. : 192300014M  
20 McCallum Street  
#09-01 Tokio Marine Centre  
Singapore 069046  
Tel : (65) 6221 6111 Fax : (65) 6225 9887  
Email : [tms@tokiomarine.com.sg](mailto:tms@tokiomarine.com.sg)  
Website : [www.tokiomarine.com.sg](http://www.tokiomarine.com.sg)

**All Risks Claim Form**

(the company does not admit liability by the issuance of this form)

FGA Claims Fax: 6225 9887

Name of Policyholder : _____	
Policy No : _____	Tel No : _____
Address: _____	Email : _____
_____	Contact Person : _____

Address of the Premises at which the loss occurred: \_\_\_\_\_

Date of loss : \_\_\_\_\_ Time : \_\_\_\_\_ am/pm Place : \_\_\_\_\_

Describe fully how the loss or damage occurred : \_\_\_\_\_

\_\_\_\_\_

Have the Police been advised or other enquiries made? (Please attach police report)

\_\_\_\_\_

Do any other person/s an interest in this lost property? ( )Yes ( )No. If Yes, please specify:

\_\_\_\_\_

Do you have any other existing insurance that refer to the property herein mentioned? ( )Yes ( )No If Yes, please specify:

\_\_\_\_\_

Have you ever suffered similar loss/damage? If so, provide details of claim.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If the loss is by fire, can it be repaired? ( )Yes ( )No. Please state the total amount claimed as set out in detail overleaf.

**Declaration:** I/We hereby declare that these particulars are true to the best of my/our knowledge and belief and I/we have in no manner caused the loss nor by any fraud or misrepresentation sought to benefit thereby. I accept that insurers would be at liberty to deny liability in part or in full if the above written answers are false or inaccurate in any aspect.

**Notice for Personal Data Protection Policy**

By signing this form:

- i) I/We acknowledge and consent to TMiS collecting, using, processing and disclosing to third party service providers and/or intermediaries, within or outside Singapore, my/our personal data for the purpose of processing and servicing my/our policies/claims;
- ii) I/We declare and confirm that I/we have obtained the consent of the person(s) and/or nominee(s) named herein, where applicable, and that he/she/they has/have authorized me/us to disclose their personal data and to give consent on their behalf for the above collection, use, process and disclosure; and
- iii) I/We acknowledge the detailed Privacy Policy Statement, governing the above, posted at [www.tokiomarine.com.sg](http://www.tokiomarine.com.sg).

\_\_\_\_\_  
Signature & Company Stamp of Insured

\_\_\_\_\_  
Date

Name : \_\_\_\_\_  
Designation: \_\_\_\_\_

NRIC NO: \_\_\_\_\_

Please mail duly completed claim form to: Tokio Marine Insurance Singapore Ltd, 20 McCallum Street #09-01, Tokio Marine Centre, S'pore 069046. Fire & GA Claims Dept - Fax : 6225 9887

**Details of Amount Claimed**

- A) If claim is for repairable damage, give particulars of damage and a tradesman's estimate for the repairs.
- B) If claim is for non repairable damage on loss, list items below completing all columns. Supporting estimates for replacement may be helpful.

Specifications of property Lost / destroyed	Cost Price	Where bought & Date Purchased	Value at time of loss

Please attach additional listing if space provided is insufficient.