

Property Claim Form

Please complete this form fully and return it to: KennCo Underwriting Ltd. Suite 7, Grange Road Office Park, Rathfarnham, Dublin.16.

\*Only emergency repairs may be authorised without the Underwriters agreement. Do not dispose of damaged articles/ property as an inspection may be necessary. An Garda Síochána must be notified in respect of any claim for theft or malicious damage.

# **POLICYHOLDER**

Insured:	Policy Number:				
Address:					
Business Description:	Telephone Number:				
Are you registered for VAT?	Yes No				
Are there any other insurances which might cover this loss	? Yes No				
If yes, please give the name of insurers and policy number:					
In the last 5 years have you sustained a loss or claimed aga Yes No	ainst any insurer for any of the risks covered by this policy?				
CLAIM PARTICULARS					
Date of loss: Ti	me of Loss:				
Where did the loss occur?					
When was the Loss/Damage discovered?					
Give full details of how the Loss/Damage occurred					
Describe the damaged property:					



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# DETAILS OF PROPERTY/ARTICLES /LOST/STOLEN/DAMAGED

<b>Description of Property</b>	Date Purchased	Original Price	Amount Claimed

Total Amount Claimed €\_\_\_\_

# **COMPLETE THIS SECTION IN RESPECT OF THEFT CLAIM**

When was the theft discovered?					
What was the method of entry?					
Were the premises unoccupied at the time	Yes	No 🗌			
If yes, please state how long premises were unoccupied?					
Was the alarm activated?	Yes	No 🗌			
If no, give reason:					
Name of Garda Station to which theft was reported?					
What enquiries have been made to trace property lost or stolen?					
Has the thief been identified?	Yes	No 🗌			
If yes, please give details					



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# **COMPLETE THIS SECTION IN THE EVENT OF FROZEN FOOD CLAIM**

Age of Freezer:\_\_\_\_\_

Was the loss due to mechanical breakdown?

# Yes No

#### THIS SECTION MUST BE COMPLETED BY THE GARDA SCIOCHANA FOR THEFT/MALICIOUS DAMAGE CLAIMS

# SECTION (A) NOTIFICATION TO AN GARDA SÍOCHÁNA

I wish to report the Loss/ Theft of the property specified below:

	Property Damaged/Stolen/Lost	Value (€)
From (A	Address):	

On Date\_\_\_\_\_Signature\_\_\_\_\_



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# Section (b) certificate for completion by An Garda Síochána

Station:	Date:		
Name of Garda:	Number		
This is to certify that:			
Name:of			
Reported to this station the Loss/Theft/Damage of property as itemised and valued above.			
Date reported:			
The Interest of KennCo Underwriting Limited has been noted	STAMP		
Signature of Garda			

### DECLARATION

I/WE HEREBY CERTIFY that the statements and particulars contained on this form and the information provided are true and complete, to the best of my/our knowledge and that I/we have withheld no material fact concerning this loss.

Signature of Insured\_\_\_\_\_\_Date\_\_\_\_\_