

## Machinery Breakdown / Fusion Insurance Claim

The supply or acceptance of this form is not an admission of liability on the part of the insurer.

Policy Number	<input type="text"/>	Client Ref No	<input type="text"/>					
Name of Insured	<input type="text"/>							
Postal Address	<input type="text"/>	Postcode	<input type="text"/>					
Email Address	<input type="text"/>							
Occupation	<input type="text"/>							
Private Phone	<input type="text"/>	Business Phone	<input type="text"/>					
Policy No.	<input type="text"/>	Due Date	<input type="text"/>					
What is your Australia Business Number (ABN)?	<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>	<input type="text"/>
Are you Registered for GST?			Yes	<input type="checkbox"/>	No	<input type="checkbox"/>		
To what extent are you entitled to claim an Input Tax Credit on the GST applicable to the premium?							<input type="text"/>	%
Details of loss	<input type="text"/>		Date of loss	<input type="text"/>				
Where did the loss occur?	<input type="text"/>		Time of loss	<input type="text"/>				

Describe as fully as possible how loss occurred


Do you consider any other party responsible for the loss?

Yes  No

If "Yes", please state why?


Are you the sole owner of the property lost or damaged?

Yes  No

If "No", give details of other owners or part owners


Do you hold any other insurances under which a claim for this loss may be lodged?

Yes  No

If "Yes", please give details


Name and type of appliance to which motor is attached

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Who was it purchased from?

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Date of purchase

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Price \$

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Is the motor under manufacturer's warranty?

Yes  No

If "Yes", has a claim been made under the warranty?


Description of property loss or damage

Description of Goods	Quantity	Cost	Amount Claimed	*Input Tax Credit %

\* Please show the Input tax Credit you are entitled to claim on the Purchase of each item as a percentage of the total GST payable

Total amount claimed

\$
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## Insurance History

Have you ever previously sustained loss/damage or caused damage or injury to 3<sup>rd</sup> parties?

Yes  No

If yes give details of such loss and amounts involved.

Was an Insurance company involved?

Yes  No

If yes, please state name of company and year of claim

Have you been convicted of or had any fines or penalties imposed for any criminal offence in the last 10 years?

Yes  No

If Yes, please provide details

## Privacy

Privacy Act 1988 requires us to tell you that we as broker and the insurer collect your personal and sensitive information in order to calculate your loss and entitlements, determine the insurer liability, compile data and handle claims.

When handling claims we and the insurer may have to disclose your personal and other information to third parties such as other insureds, reinsurers, loss adjusters, external claims data collectors, investigators and agents, or other parties as required by law

Where you give us information about the other persons you must have their consent to this and provide it on their behalf. If not, you must tell us.

You have the right to seek access to your personal information and to correct it at any time. Please contact us to advise if any changes are required.

## Internal Dispute Resolution (IDR) Statement

Disputes are not an everyday occurrence. However insurers provide an internal dispute resolution process should any dispute arise. Please feel free to ask for details. If you're not satisfied with the outcome of that process, we will advise you how to contact the insurance industry's external independent complaints scheme (subject to eligibility).

### Declaration (must be completed)

1. I /We the insured do solemnly and sincerely declare that I/We have complied with the conditions and warranties (if any) of the policy and have not deliberately cause the loss or damage or sought unjustly to benefit thereby any fraud or misinterpretation and that information shown is true and the I/We have not concealed any information relating to this claim may be refused if the information is untrue, inaccurate or concealed.
2. Further is understood and agreed that if any property claimed for is subsequently recovered is undamaged condition I/We will immediately refund the company any sum which may have been paid to me/us in respect of such property. In the event of any property being recovered in damage condition I/We will immediately hand the same over to the company for disposal as may be agreed
3. I/We acknowledge that I/We have read and understood the Privacy Act information referred to above and consent to the collection, storage, use of disclosure of personal and sensitive information of all persons affected by this claim.
4. I/We acknowledge that if I /We do not agree to the collection of this personal and sensitive information, then the broker and the insurer will be unable to process my/our claim.

Please complete your bank account details so that any payment can be made by electronic funds transfer:

Name of Account \_\_\_\_\_ Name of Bank \_\_\_\_\_

BSB \_\_\_\_\_ Account Number \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

## How To Get Quick Action On Your Claim

1. Complete the attached form and return to our office. If an assessor is appointed, give them the forms.
2. Attach all **original** quotations or invoices obtained for replacement of or repair to the damaged or missing property. Photocopies are not accepted as a rule.
3. Attach **original** valuations and receipt of purchases whenever possible.
4. Advise the Police immediately in the event of loss by burglary, housebreaking, theft, suspected malicious damage. Also make sure the premises are secure to avoid further incidents.

**Note:** Police reports are very slow so if you can obtain one at the time the report is taken, then this will save valuable time or at least obtain a copy or report number.

5. Attach any letter of demand or other correspondence that you may receive from any Third Party.
6. Do not make any admission of liability for loss or damage caused by you to the Third Parties.

### ***WHAT WE WILL DO-IF THE PAPERWORK IS CORRECT AND COMPLETE:***

- Submit the claim form to the insurer.
- If the claim has not been paid within 30 days we will contact the Insurer and the advise you accordingly.
- We will then follow up the claim when necessary until the settlement is reached, however, please feel free to call at any time.

### ***WHAT AN ASSESSOR WILL DO:***

- An assessor is an independent person who is appointed by the Insurer for their expertise in helping you finalise a larger or more difficult claim.
- They will interview and obtain details of a loss and arrange for quotes and prepare the necessary paperwork.
- The assessor is your contact point.
- The assessor will write a report to the Insurer recommending a course of action.
- This can take time depending on their work load and Police Reports.
- The Insurer will not act until these reports are received and although not bound by the assessor recommendations, the Insurers usually accept these reports.
- If you are unhappy with any aspect of the claim, advise the assessor. If he is unable to correct the problem then contact us immediately. We will not know of any problem without being advised.
- If you are unhappy with the assessor's responses, contact us immediately