

electronic equipment claim form



Wesfarmers General Insurance Limited, ABN 24 000 036 279

The issue or acceptance of this form is not to be construed as an admission of liability by Lumley Insurance.
Please complete all questions to prevent processing delays.

1. Client Details

Policy number Claim number

Contact name

Insured

Postal address Postcode

Phone number (w) Phone number (h) Mobile number

Date of loss (dd/mm/yyyy)

2. Goods and Services Tax (G.S.T.)

To ensure that you do not incur any unnecessary GST Liabilities on this claim settlement please advise:

ABN, if applicable

Entitlement to an Input Tax Credit %

3. Equipment Details

Location of damaged machine

Description of damaged machine

Details of damaged machine (attach list if necessary)

Make <input type="text"/>	Type <input type="text"/>	Model <input type="text"/>
Model <input type="text"/>	Serial number <input type="text"/>	Year of manufacture <input type="text"/>

Estimate of cost of damage (Please attach repairers report)
\$

NSW Lumley House, Level 9, 309 Kent Street, Sydney 2000
Suite 19, 50 Glebe Road, The Junction 2291
VIC Level 3, 99 King Street, Melbourne 3000
ACT Level 4, 10 Rudd Street, Canberra City 2601
TAS Level 11, 27 Paterson Street, Launceston 7250
SA 465 Pulteney Street, Adelaide 5000
WA Level 9, 50 St George's Terrace, Perth 6000
QLD Level 2, 99 Melbourne Street, South Brisbane 4101
Level 5, Northtown Tower, Flinders Mall, Townsville 4810
NT Level 2, Beagle House, 38 Mitchell Street, Darwin 0800

Phone (02) 9248 1111 Fax (02) 9248 1122
Phone (02) 4925 7500 Fax (02) 4940 0295
Phone (03) 8627 4333 Fax (03) 8627 4312
Phone (02) 6279 0333 Fax (02) 6279 0330
Phone (03) 6345 4700 Fax (03) 6345 4711
Phone (08) 8228 1700 Fax (08) 8228 1775
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Phone (07) 4722 6000 Fax (07) 4724 4398
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Lumley Insurance is a trading name of Wesfarmers General Insurance Limited

Was any software lost or damaged?

No Yes If **Yes**, what was it?

What caused the damage?

What is the replacement cost?

\$

Was any data lost?

No Yes

What was the nature of the data?

What caused the data loss?

What is the reinstatement cost?

\$

Did you keep back-up disks/data?

No Yes If so, are these useable? if **No**, why not?

If increased cost of working or business interruption is insured

What time did the equipment fail?

am/pm

Which department(s) are affected by the stoppage?

What is your approx. daily turnover?

\$

If you are incurring increased costs of working:

What is the daily cost of these?

\$

What are you purchasing with the increased costs?

When do you anticipate repairs/replacement to the damaged machine to be completed? (dd/mm/yyyy)

Who is your company accountant?

Phone number (w)

Please attach or keep all invoices/receipts in support of your claim. Do not destroy or otherwise relinquish possession of damaged parts in support of your claim.

4. Privacy Statement

Lumley Insurance respects your privacy and complies with the Privacy Act and the National Privacy Principles. A copy of our Privacy Policy and Procedures is available at any of our offices or online at www.lumley.com.au

5. Declaration

I/We certify that the information given in this claim form is truthful, accurate and complete. No information likely to affect this claim has been withheld. I/We understand that this claim may be refused in whole if the information is untrue, inaccurate or concealed.

Signature

Date (dd/mm/yyyy)