

CONSTRUCTION WORKS - Property Damage Report

INSURED DETAILS

Full Name of Insured (inc. company &/or trading names)

Postal Address

State

Postcode

Contact Name

Email Address

Business Phone Number

Mobile Phone Number

Fax Number

POLICY DETAILS

Policy Number

Expiry Date

GST AND INSURANCE CLAIMS SUPPLEMENTARY INFORMATION.

1. Are you a Registered Business: Yes No If "Yes" please list your ABN Number:

2. Have you claimed an input tax credit on the GST applicable to this policy? (if you are registered and have an ABN No.) Yes No

3. Is the amount claimed less than 100% of the GST applicable to the premium? Yes No

- Please specify the percentage amount claimed %

CONTRACT / PROJECT / JOB DETAILS

Job Site Address

State

Postcode

Name of Owner

Description of Contract: New Construction Renovation Maintenance

Other:

Contract Price

 \$

Start Date

Finish Date

OFFICE DETAILS

VIC

GPO Box 4897 V V, Melbourne VIC 3001
Ph: 1300 554 227 Fax: 03 9654 3277

NSW

PO Box 883, North Ryde BC 1670
Ph: 1300 200 201 Fax: 1300 694 663

SA

PO Box 550, Hindmarsh SA 5007
Ph: 1300 600 601 Fax: 08 8340 7599

TAS

GPO Box 182, Hobart TAS 7001
Ph: 03 6234 9770 Fax: 03 6234 9735

ACT

GPO Box 2188, Canberra ACT 2601
Ph: 02 6230 4985 Fax: 02 6230 0541

WA

PO Box 1494, Osborne Park DC, WA 6916
Ph: 1300 800 801 Fax: 08 9443 8166

QLD

PO Box 3061, Sth Brisbane QLD 4101
Ph: 07 3255 3600 Fax: 07 3255 3144

NT

PO Box 400, Parap NT 0820
Ph: 08 8981 9400 Fax: 08 8981 1706

Website: www.hiainsurance.com.au

DAMAGE / LOSS DETAILS

Date of the Event

Time

Address where event happened

State

Postcode

Describe how the loss/damage occurred

How was the loss discovered, and by whom?

Are you the owner of the lost/damaged property? Yes No (Please give details of all of the other parties and their interest in the property)

Name

Address

State

Postcode

Was the lost/damaged property:

a) Subject to a lease or another agreement? Yes No

b) Covered under another insurance policy? Yes No

Please provide a detailed explanation for all questions answered "Yes" under Lost/Damaged Property:

What steps have been taken to minimise damage to the property?

Has any property been recovered? Yes No (If "Yes" please provide details below)

Were the police notified? Yes No (Please provide details below and attach a copy of the report)

Date of the Report

Station

Officer

Please provide details of any other party responsible for the damage.

Name

Contact Phone Number

Address

State

Postcode

Details of their responsibility:

If a subcontractor is responsible please provide the following information

Occupation/Trade

Name of the Subcontractors Public Liability Insurer

Policy Number:

FIRE DAMAGE - Please complete this section for fire damage.

Who was in the premises at the time of the damage?

For what purpose?

STATEMENT OF CLAIM

Description of Property/Article lost, stolen, damaged or destroyed	Date of Purchase	Purchase Price (Net of GST)	Replacement Cost (inc. of GST)	GST	Net Amount Claimed
TOTAL				\$	\$

IMPORTANT NOTE: To support your claim the following (original) documents are required:

- the invoice for the original purchase of the goods/property.
- the invoice/quotation for the replacement purchase of the goods/property stolen, lost or damaged.

PRIVACY STATEMENT

HIA Insurance Services Pty Ltd ('HIAIS') is committed to protecting your personal information in accordance with the Australian Privacy Principles under the Privacy Act 1988 (Cth). We collect, use and disclose personal information to offer promote, provide, manage and administer the many financial services and products we and our group of companies are involved in, as set out in the [HIAIS Privacy Notice](#).

Unless we hear from you otherwise, through the means set out in the [HIAIS Privacy Notice](#), we will assume that you have read the [HIAIS Privacy Notice](#) and you have no objection to us handling your personal information in the manner set out in this notice (which includes contacting you to promote our products and services we think may be of interest to you). A copy of the [HIAIS Privacy Notice](#) can be located on our website www.hiainsurance.com.au

DECLARATION

FOR PERSONAL APPLICANTS

I consent to:

- the use of personal information about me for the purposes shown in the Privacy Statement, and;
- the disclosure of personal information about me to, and obtaining personal information from, other parties, including those shown in the Privacy Statement, for any of these purposes.

FOR ALL APPLICANTS

If I have disclosed personal information about any other person, I confirm that I am authorised to:

- disclose to you personal information about that person and to consent to its use for the purposes shown in the Privacy Statement, and;

- consent to disclosure to, and obtaining of other personal information about that person from, other parties including those shown in the Privacy Statement, for any of these purposes.

I/We hereby declare that:

- i) My/our attention has been drawn to the important notices affixed to this Proposal Form and further I/we have read these notices carefully and acknowledge my/our understanding of their content by my/our signature below.
- ii) The above statements are true, and that I/we have not suppressed or misstated any facts and should there be any information given by me /us alter between the date of this proposal form and the inception date of the Insurance to which this proposal relates I/we shall give immediate notice thereof.

I/We hereby acknowledge that my/our duty of disclosure has been brought to my/our notice as per the disclosure notice printed on this Application Form. I/We also declare that the information provided in this application form by me/us is correct in every particular.

Declared by (Name) Position

For and On Behalf of

Signature

Date