

Landlords Claim Form



If there is insufficient space on this form for your answers, please attach a separate sheet(s), indicating the Section and Question you are answering/providing additional information for.

Your Privacy

The Privacy Act 1988 (Cth) requires iinsure Pty Ltd to make the following disclosure before collecting personal information about you after 21 December 2001:

- iinsure Pty Ltd collects personal information in order to provide it's various services which include insurance broking, claims management, risk management consultancy, underwriting management, and reinsurance.
- If the personal information iinsure Pty Ltd requests from you is not provided, iinsure Pty Ltd or any involved third party may not be able to provide the appropriate services.
- iinsure Pty Ltd discloses personal information to third parties who are involved in the provision of our services. For example, in arranging and managing your insurance needs iinsure Pty Ltd may provide information (including sensitive information such as health information) to insurers, reinsurers, other insurance intermediaries, it's advisors such as loss adjusters, lawyers and accountants, and other parties involved in the claims handling process. By signing this form and continuing to deal with us, you confirm on your behalf and/or on behalf of those you represent consent to iinsure Pty Ltd and these parties collecting, using and disclosing personal and sensitive information about you.
- iinsure Pty Ltd has a duty to maintain the confidentiality of it's client's affairs which includes their personal information. Our duty of confidentiality applies except where disclosure of your personal information is with your consent or required by law.
- iinsure Pty Ltd may make use of your personal information to provide you with information about it's products and services.

Further details on the iinsure Pty Ltd are on our website: www.iinsure.com.au

Contact Us

Simply contact the iinsure Pty Ltd Privacy Officer on the details below if you would like to:

- Access the personal information iinsure Pty Ltd hold about you
- Update or correct the information iinsure Pty Ltd holds about you
- Discuss your privacy concerns
- Be removed from the mailing list to receive information about iinsure Pty Ltd products and services

Privacy Officer

Email: service@iinsure.com.au

Telephone: 08 8238 0111

Claim Number

Name of insured

Contact Person

Home Phone

Work Phone

Mobile

Email

Occupation

Postal Address

Postcode

Broker/Agent name

Phone No

Policy number

Excess \$

Inception date

Expiry date

Interested parties Is the property being claimed for under Financial Agreement?

Yes

No

Name of Financier

Contract No

GST Are you registered for GST purposes?

Yes

No

ABN

To what extent are you entitled to claim an Input Tax Credit or GST for this policy?

%

Managing Agent details

Name of managing agent

Contact person name

Telephone number

Email

Documentation required

Attached

Documents to establish loss (eg. receipts, invoices, quotes, etc)

Residential lease, current at time of loss

Commencement and termination inspection reports

Tenancy application form

Copy of Bond Authority receipt of bond refund

Copy of tenant rental ledger

Copy of any notices issued to the tenant

Copy of tribunal / court ruling

Copy of the new Lease (to confirm re-lease date)

Rent Loss details

Full name of tenant/s (Surname, Company, Partnership)

Given name/s

Contact person in company

Tenant's forwarding address

Street number/name/suburb

Postcode

Tenant's Driver's Licence or Passport number

Driver's Licence No

State

Passport No

Country of issue

What was the amount of bond held?

\$

What was the weekly rent?

\$

What notices were issued to the tenant?

What date did the tenant move in?

/ /

What date did the tenant vacate the property?

/ /

What was the total amount of Rent Loss?

\$

Date rent paid to

/ /

Date property was re-leased

/ /

Have you received the bond money?

Yes*

No

*Attach a copy of the Bond Authority receipt for the bond refund

Summary of Rent Loss and Legal Expenses

Rent Loss

Rent loss for period

/ /

to

/ /

\$

Bond amount

\$

Less: Allowable re-leasing expenses

General cleaning

\$

Steam cleaning carpets

\$

Advertising

\$

Re-leasing fees

\$

Other - give details

\$

\$

\$

Total re-leasing expenses

\$



\$

Balance of bond monies

\$



\$

Rent Loss claim amount

\$

Note: Cleaning and allowable re-leasing expenses are to be absorbed by the bond monies and any remaining monies are to be deducted from the rent loss, subject to limits applicable. Standard maintenance costs are not considered as allowable re-leasing expenses.

Legal Expenses

Legal Expenses claim amount

\$

Legal expenses are those which you incur when you have to apply to a court for remedial action against a tenant. These expenses can only be claimed with our prior written approval for the purpose of minimising a claim under this policy.

Damage or Theft

Details of loss or damage

Estimated value

\$

\$

\$

\$

\$

\$

\$

\$

\$

Total Claimed

\$

Who caused the loss or damage?

Who discovered the loss or damage and when?

Name

Date

/ /

Time

am / pm

Which police station was the loss or damage reported?

Police officer's name

Police report number

Note: Malicious Damage or Theft claims must be reported to the Police.

Did all the property lost or damaged belong to you?

Yes

No (give details)

Name of owner

Details of the property which did not belong to you

Witnesses

Were there any witnesses to the Event?

Yes

No

(If yes, please complete the following)

Name

Street number/name/suburb

Town/suburb

Postcode

Where was the Witness?

Name

Street number/name/suburb

Town/suburb

Postcode

Where was the Witness?

Security

Give details of any extra precautions or security improvements taken since the loss

Give details of any other action taken to recover or reduce your loss

Third Parties Do you know who was responsible for the damage? **Yes** **No**

Name

Phone No.

Street number/name/suburb

Town/suburb

Postcode

Other details (eg. registration no.)

Other Insurance Is there any other insurance on the property? **Yes** **No**

Name of Insurer

Policy details

History

Have you had any insurance or renewal of insurance declined or cancelled or special conditions imposed in the last 5 years? **Yes** **No**

Have you ever been convicted of or had any fines or penalties imposed for any criminal offence? **Yes** **No**

Have you suffered a loss or made a claim on a property related insurance policy in the last 5 years? **Yes** **No**

If yes to any history questions please give details

Privacy

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

We disclose personal information to third parties who we believe are necessary to assist us and them in providing the relevant services and products. For example, in handling claims, we may have to disclose your personal and other information to third

parties such as other insurers, reinsurers, loss adjusters, external claims data collectors, investigators and agents or other parties as required by law. We limit the use and disclosure of any personal information provided by us to them to the specific purpose for which we supplied it.

You have the right to seek access to your personal information and to correct it at any time. Please contact us on 1300 360 529 EST 9am-5pm, Monday-Friday and advise us of the changes.

IDR Statement

Disputes are not an everyday occurrence at Allianz. However we do provide an internal dispute resolution process should any dispute arise. Please feel free to ask for details.

If you are not satisfied with the outcome of this process, we will advise you how to contact the insurance industry's external independent complaints scheme (subject to eligibility).

Privacy Declaration

I/We acknowledge that I/we have read and understood the Privacy Act 1988 information referred to above and consent to the collection, storage, use and disclosure of personal and sensitive information of all persons affected by this claim, with their approval.

I/We acknowledge that if I/we do not agree to the collection of this personal and sensitive information then insure will be unable to process my/our claim.

Signature of Insured

Date / /