

## PROPERTY CLAIM FORM

The Member of the Activities Industry Mutual or the Member's duly authorised representative should complete this form to notify the Mutual of a claim under the relevant section of the Cover Wording.

Please complete all relevant sections as fully as possible and attach additional pages if necessary together with copies of all relevant documents, quotes, photographs and invoices.

Please contact us if you have any questions in relation to completion of the form.

The completed Claim Form should be sent to:

Activities Industry Mutual Ltd  
First Floor, Douglas House  
Quarry Hill Road  
Tonbridge Kent, TN9 2RH

Email: [claims@activitiesindustrymutual.com](mailto:claims@activitiesindustrymutual.com)

### MEMBER DETAILS

Member Name

Member Number

Contact Name

Postal Address

Secondary Contact (someone to deal with the claim on your behalf)

Telephone No

Email Address

Are you VAT Registered

Yes

No

### DETAILS OF EVENT

Date

Time (AM/PM)

Date Discovered

Time (AM/PM)

Where did the event occur?

Is any Third Party to blame, or partly to blame, for the loss or damage?

Yes

No

If Yes, please provide name and address

Please provide a brief description of the loss or damage, including the cause

**CLAIMS FOR LOSS BY BURGLARY, THEFT OR MALICIOUS DAMAGE ONLY**

Method of Entry

The extent to which the premises /items were protected from the loss or damage at the time of the occurrence, e.g. alarm, CCTV, locks or any other security

## DETAILS OF LOSS

Please complete for all items being claimed for, attaching additional sheets as necessary

## LOSS OF PROPERTY

Description of Property Lost/Damaged Including Serial Nos	Date Acquired	Value of Salvage (if any)	Current Replacement Cost	Amount Claimed
Total Amount Claimed				

**DAMAGE TO PROPERTY (VAT invoices for repair or replacement must be submitted)**

Description of property and scope of damage	Name of Repairer	Cost of Repairs
Total Amount Claimed		

**ADDITIONAL INFORMATION**

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**USING PERSONAL INFORMATION**

We collect personal information when we provide a quote, arrange or renew cover and also when a claim or complaint is made. We may collect and use information we obtain from other people, businesses and organisations. We will only keep personal information for as long as we need to use it. You can see how we use personal information, and the legal rights of people whose personal information we hold, in the privacy notice on our website <http://www.activitiesindustrymutual.co.uk/privacy-notice/>. If you would like us to send you a copy of our privacy notice please ask us.

**IMPORTANT INFORMATION**

It is a condition of the cover that it may be forfeited and claims rejected if any claim is found to be fraudulent, which includes being deliberately exaggerated, or if any false declaration or statement is made in support of it.

**DECLARATION**

I declare the above information to be true and correct to the best of my knowledge and belief and acknowledge that Activities Industry Mutual may exercise its discretion to grant cover having regard to the information.

**Signed****Name****Date**