

Claim Notice Form

For Damage Under Movable Goods such as Electronic Gadget

Each item should be completed correctly and in good faith

1. Policy / Certificate Number
2. Insured Name
- Address
- Phone / Facsimile
3. Type of Interest Insured
4. Date of Loss / Damage Time Place
5. Explain how the loss / accident occurred
6. Are you the sole owner of the property damage? Yes No
7. Are there any other insurances covering this accident? Yes No
- If yes, give name of Insurance Company

8. Details of Property Damage

(1)	(2)	(3)	(4)	(5)
No	Quantity	Description of Property	Extend of Damage	Amount of Claim
Total				

AUTHORIZATION FOR MY PERSONAL INFORMATION

I agree that your company acquires, uses, provided or registers my privacy information regarding this insurance claim so far as the followings are concerned and to the extent your company needs for the business in order to perform this contract, to underwrite insurance contract, to judge on payment or to provide relevant services that your company may provide the information with business entrusted company(including insurance agency), medical institution, repairing company, parties related to claim or payment of insurance money, parties related to accident or others, or to be provided the information by these persons.

Made up in good faith at

Date

NAME AND SIGNATURE OF INSURED

Please attach the following documents with this form and send it back.

Necessary of Claim Documents	Damage	Fire	Other
Claim Notice Form	✓	✓	✓
Payment Slip	✓	✓	✓
Monthly billing statement	✓	✓	✓
Copy of passport -Stamp page of embarkation -Page of your photo To confirm the purchase is overseas or not	✓	✓	✓
Replacement Invoice or Repair	✓	✓	✓
Photo of the damage goods	✓	✓	✓