



SOMPO

PT SOMPO INSURANCE INDONESIA

Head Office : MAYAPADA Tower 2, 19th Floor,

Jl. Jend. Sudirman Kav. 27, Jakarta 12920 ; Phone : 021-2500 890, Fax : 021-2500 891, 2500 892

LAPORAN KLAIM ASURANSI HARTA BENDA

PROPERTY INSURANCE CLAIM NOTICE

(Setiap pertanyaan harus dijawab dengan lengkap dan pasti)

Each item should be completed correctly

1. No. Polis / Sertifikat
Policy / Certificate No.
 2. Nama dan alamat Tertanggung
Name and address of the Insured
 3. Lokasi kejadian
Risk location
 4. Penyebab kerugian
Cause of loss
 5. Tanggal kejadian Waktu kejadian
Date of loss *Time*
 6. Sebutkan Polis Asuransi Harta Benda lain yang dimiliki (bila ada)
Another Property Insurance Cover (if any)
 7. Apakah ada pihak lain yang juga berkepentingan atas Harta Benda tersebut ?.....
Is there any other party who has a financial interest in the damaged property ?
 8. Apakah kejadian tersebut melibatkan pihak ketiga ?
Was there any other party involved in this loss incident ?
 9. Apakah tindakan yang telah diambil untuk mengurangi kerugian ?
What was the action taken to minimize the loss
 10. Apakah kejadian tersebut telah dilaporkan kepada Polisi ?
Have you reported this incident to the Police
 11. Ceritakan peristiwa terjadinya kerugian
Detail of the incident
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Dibuat dengan sebenarnya di: Tanggal
Made up in good faith at *Date*

Nama Jelas, tandatangan & cap perusahaan
Name, signature & Company's seal



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LIST OF LOSS/DAMAGE

- Note :
1. Property Insurance Policy constitutes contract of indemnity, all claims therefore will be strictly based on the actual value of the insured property prior to the loss without taking into account any advantages or profit
 2. If the damaged property is still repairable, please note its repair cost as the claimed amount
 3. Every claim has to be supported by relevant document

1.	2.	3.	4.
Claimed items	Purchasing price	Date of purchase	Claim amount