

Previous Damage/Loss

Have you ever sustained Damage/Loss of this nature previously?

Yes No

If 'YES' give details:

Particulars of Damage/Loss

Please retain damaged property

State where damaged property may be inspected:

Note:

- (i) Please complete all relevant columns.
(ii) Receipts, Estimates or other documentary evidence will be required to prove damage/loss and should be attached in support of your claim.
(iii) The Insured in not entitled to abandon salvage to the Company.

Table with 6 columns: Description of property damaged or lost, Date of Purchase, Original Cost Price, Present Day Cost of Replacement, Deduction for Wear, Tear or Depreciation, Amount Claimed. Includes a Total row at the bottom.

Certification for completion by An Garda Siochana (To be completed for theft or loss only)

Address _____

Date ____/____/____

Division _____ District _____

This is to certify that (name) _____ of (address) _____

reported to this station on the undernoted date the loss/larceny of property as itemised, valued as estimated above.

Date reported ____/____/____

The interest of Allianz p.l.c. has been noted.



Signed: X _____ (Garda)

I/We declare that the foregoing statements are true to the best of my/our knowledge and belief, that the articles and property described on the above Schedule were damaged/lost under the circumstances described and that such articles and property belong to the persons named, no other person having any interest therein.

Signature of Policyholder: X _____

Date: X ____/____/____

Please return completed form to:

Allianz p.l.c., Allianz House, Elmpark, Merrion Road, Dublin 4.

Telephone: (01) 613 3000 Fax: (01) 613 4444 Email: info@allianz.ie Website: www.allianz.ie

Allianz p.l.c. is regulated by the Financial Regulator. Registered in Ireland, No. 143108