Tokio Marine Insurance Singapore Ltd.
Company Reg. No. : 192300014M
20 McCallum Street
#09-01 Tokio Marine Centre
Singapore 069046
Tel : (65) 6221 6111 Fax : (65) 6225 9887
Email : tmis@tokiomarine.com.sg
Website : www.tokiomarine.com.sg

All Risks Claim Form

(the company does not admit liability by the issuance of this form) FGA Claims Fax: 6225 9887

Name of Policyholder : _____

Policy No : _____ Tel No : _____

Address: _____ Email : _____

_____ Contact Person : _____

Address of the Premises at which the loss occurred: _____

_____

Date of loss : _____ Time : _____ am/pm Place : _____

Describe fully how the loss or damage occurred : _____

_____

Have the Police been advised or other enquiries made? (Please attach police report)

_____

Do any other person/s an interest in this lost property? ( )Yes ( )No. If Yes, please specify:

_____

Do you have any other existing insurance that refer to the property herein mentioned? ( )Yes ( )No If Yes, please specify:

_____

Have you ever suffered similar loss/damage? If so, provide details of claim.

_____

_____

_____

If the loss is by fire, can it be repaired? ( )Yes ( )No. Please state the total amount claimed as set out in detail overleaf.

Declaration: I/We hereby declare that these particulars are true to the best of my/our knowledge and belief and I/we have in no manner caused the loss nor by any fraud or misrepresentation sought to benefit thereby. I accept that insurers would be at liberty to deny liability in part or in full if the above written answers are false or inaccurate in any aspect.

Notice for Personal Data Protection Policy

By signing this form:

i) I/We acknowledge and consent to TMiS collecting, using, processing and disclosing to third party service providers and/or intermediaries, within or outside Singapore, my/our personal data for the purpose of processing and servicing my/our policies/claims;

ii) I/We declare and confirm that I/we have obtained the consent of the person(s) and/or nominee(s) named herein, where applicable, and that he/she/they has/have authorized me/us to disclose their personal data and to give consent on their behalf for the above collection, use, process and disclosure; and

iii) I/We acknowledge the detailed Privacy Policy Statement, governing the above, posted at www.tokiomarine.com.sg.

_____ _____

Signature & Company Stamp of Insured Date

Name :_____ Designation: _____

NRIC NO:_____

Please mail duly completed claim form to: Tokio Marine Insurance Singapore Ltd, 20 McCallum Street #09-01, Tokio Marine Centre, S'pore 069046. Fire & GA Claims Dept - Fax : 6225 9887

Details of Amount Claimed

A) If claim is for repairable damage, give particulars of damage and a tradesman's estimate for the repairs.

B) If claim if for non repairable damage on loss, list items below completing all columns. Supporting estimates for replacement may be helpful.

Specifications of property Lost / destroyed	Cost Price	Where bought & Date Purchased	Value at time of loss

Please attach additional listing if space provided is insufficient.