A. I COIL I	IN CINIMATION										
Relationship to Chubb:					Company	Company:					
Name:											
Address:											
City:		State:			Postcode	<b>:</b>		Country:			
Phone No:		Mobile No:			Email:						
B. POLICY HOLDER / INSURED / BENEFICIARY INFORMATION											
Policy No:				Policy Ty	Policy Type:						
Name:											
Address:											
City:		State:			Postcode	:		Country:			
Phone No:		Mobile No:			Email:						
C. LOSS INFORMATION											
Date of Loss:		I		Loss Loca	Loss Location:						
Type of Loss:											
If applicable,	please select type	of weather dan	nage:								
Is the business operating at norm		nal levels?			Is the	Is the claim for:					
Loss Description:											
Contact Nam	ne:				Phone No:						

YOUR INFORMATION

# D. CLAIM DECLARATION

### **Your Privacy**

In the course of providing insurance and processing insurance claims, we need to collect personal and/or sensitive information as defined in Privacy Act 1988 (Cth) (the Act) about persons we insure and persons associated with persons we insure. If an insured does not give us this information, we may not be able to provide insurance or process a claim. In accordance with the Act, our privacy policy contains the information required to be given to persons about whom we collect personal and/or sensitive information. It provides information on how an insured can make a complaint against us for a breach of the Australian Privacy Principles ("APPs"), or registered APP code(s), if any, that binds us.

#### Your Access to Your Personal and Sensitive Information

An insured can request access to personal and sensitive information that we hold about them. Your rights to access and our rights to refuse access are set out in the Act.

#### Our Use of Personal and Sensitive Information

We may at any time use personal and/or sensitive information we collect about individuals subject to insurance cover to provide a quotation or assess a proposal for insurance; to provide, amend or renew an insurance policy; or to respond to a claim.

#### **Our Disclosure of Personal and Sensitive Information**

We may at any time disclose personal and/or sensitive information we collect to the following types of organisations (some of which may be outside Australia). These include re-insurers; external valuers and appraisers; Loss adjustors, investigators and other organisations retained by us who help us to provide our claims service; professional advisers, such as accountants and lawyers; and other organisations that provide services to us in relation to the provision of insurance. To assist us in providing insurance services to an insured, we may, from time to time, transfer personal and/or sensitive information overseas to the types of organisations listed above in Canada, China, Hong Kong, India, Philippines, Singapore, Thailand, the United Kingdom and the United States of America. Where we do so, we take reasonable steps to ensure it is kept confidential.Our Privacy Policy statement is readily available on our website at www.chubbinsurance.com.au.

#### Consent

You consent and authorise us to collect, use, store and disclose personal and sensitive information provided either directly by you or your representative or agent in accordance with the Act. Where personal and sensitive information is provided to us by a person, other than yourself, you agree that all necessary consents to collect, use, store and disclose that personal or sensitive information to us have been made or given. Our privacy policy is readily available on our website www.chubbinsurance.com.au. Alternatively, please contact us if you would like a copy.

#### **Declaration**

I/We do hereby declare that the foregoing answers are true and correct. I agree that if I have made or shall make any false or untrue statement, suppression or concealment, my right to claim could be forfeited.

Your Signature:	Date:
Your Signature.	Date.

By clicking on Submit, a new email will open automatically with your completed form attached. Please attach any supporting documentation to the email and send to aus.propertyclaims@chubb.com

For further information please contact your nearest Chubb Insurance office or visit www.chubbinsurance.com.au

## **Branch Offices**

Brisbane Level 13, 40 Creek Street, Brisbane, QLD 4000 Phone: 07 3227 5777

Melbourne Level 12, 720 Bourke Street, Melbourne, VIC 3000 Phone: 03 9242 5111

Perth Level 1, 225 St George's Terrace, Perth, WA 6000 Phone: 08 6211 7777

Sydney Citigroup Centre, Level 29, 2 Park Street, NSW 2000 Phone: 02 9273 0100



Chubb Insurance Company of Australia Limited ABN 69 003 710 647 AFSL 239778 www.chubbinsurance.com.au

Chubb and Chubb Insurance Company of Australia Limited refer to member insurers of the Chubb Group of Insurance Companies. Insurance cover is issued by Chubb Insurance Company of Australia Limited, ABN 69 003 710 647, AFS Licence Number 239778. This form is for information collection purposes only, contains general information and may not suit your particular circumstances. The precise insurance cover provided is subject to the terms, conditions and exclusions set out in the relevant Product Disclosure Statement (PDS) or General Product Information (GPI) and the insurance policy when issued. Insurance cover may not apply to the extent that trade or economic sanctions or other laws or regulations prohibit Chubb, its parent company or its ultimate controlling entity from providing insurance cover. Chubb is authorised to provide general insurance products. Please obtain and read carefully the relevant insurance policy before deciding to acquire any insurance product. A Policy wording can be obtained at www.chubbinsurance.com.au; through your broker or by contacting any of the Chubb offices.