



Please provide accurate and thorough information throughout this Claim Form to allow us to resolve your claim as quickly and professionally as possible.

For enquiries about completing your Claim Form, please call us on **1300 SCINSURE (1300 724 678)** or email **yourclaim@scinsure.com.au**. You can also visit www.stratacommunityinsure.com.au for further information.

If you are submitting this form as a printed hard copy, please post the completed form to **Strata Community Insurance, PO Box 631, North Sydney NSW 2059**.

Please Note: If your property is managed by a Strata Manager, or you utilise the services of a Broker, you may wish to contact them before completing our claim form as they may assist you with your claims.

Insured Property Information

The Insured

Policy Number

Risk Street Address

Suburb

State

Postcode

Your Details

Your Relationship to the Insured

Chairperson

Strata Manager

Insurance Broker

Lot/Unit Owner

Your Name

Company Name (if applicable)

Your Street Address

Suburb

State

Postcode

Your Email

Your Phone

A copy of this claim form will be sent to the email address you enter above.

Is there a Building Manager?

Yes

No

Additional Contact Details (if applicable)

GST Details

Is the Insured registered for GST purposes?

Yes

No

Claim Details

Date of Loss

Have the repairs been undertaken?

Yes

No

Description of what has been damaged, lost or stolen, including the Lot/Unit number where applicable

Description of how the Damage/Loss occurred

If the claim involves water damage, please advise if the leak has been repaired.

Repaired

Not repaired

Additional information

Approximate Claim Amount (\$)

Do you require a Builder or Assessor?

Yes

No

Does the claim include any damage to fences?

Yes

No

Police Report

Was a report made to the police?

Yes

No

You must report any loss, theft or vandalism of the property to the police.

Other Insurances

Is there any other insurance on the property?

Yes

No

Third Party

Is there a third party involved?

Yes

No

Plumbing Repairs

Does the claim include any costs for plumbing repairs?

Yes

No

Fusion of Electrical Motors

Does the claim include any costs for fusion?

Yes

No

Claim Settlement and EFT Details

Should the claim be accepted, or partially accepted, Strata Community Insurance may opt to arrange settlement by way of EFT.

It is important to note that the settlement will be made in favour of the Insured. This is the party named on the Insurance Schedule, which under usual circumstances will be the Owners Corporation, or similar, depending on your state.

Taking the above into consideration, please provide the account details of the Insured.

Account Name

BSB

Account number

Claim Declaration

I certify that I am authorised to submit this claim on behalf of the insured, that the information provided is truthful, accurate and complete, and that no information likely to affect this claim has been withheld. I understand that this claim may be refused if information is untrue, inaccurate or withheld.

Any personal information collected will be used to process and manage this claim. If you do not provide this information we may not be able to process or manage this claim. We may have to disclose your personal information to third parties who assist us in assessing and processing this claim, including insurers and reinsurers, health service providers, investigators, our specialist advisors and service providers, or as required by law. These entities may be located in Australia or overseas.

By submitting this claim you authorise us to use your personal information in this way and in accordance with our Privacy Policy. Our Privacy Policy contains further details including how you can access and correct personal information we hold about you, and how to complain about any breach of the Australian Privacy Principles. For a copy of our Privacy Policy please refer to our website, or email compliance@scinsure.com.au

I Agree

Yes

Please note that we cannot process your claim unless you agree to the Claim Declaration above.