



Commercial Property Damage Claim Form



Instructions: Please complete each of the following questions fully (if you fail to do so, delay through further enquiries may ensue), and give full details of the property damaged/destroyed.

Policyholder Details

Name of Insured

Claim under Policy Number

Business or Profession

Address of Insured

Telephone number

Are you registered for VAT?

 Yes No

When did loss/damage occur?

Date and Time

Address at which loss/damage occurred?

Please state fully the cause/circumstances of the incident

Are you the sole owner of the property claimed for?

 Yes No

Is the property claimed for covered by any other policy?

 Yes No

If so please let us have full details of such policy

Please give details of any previous losses by any of the risks insured by this or any other policy

To be completed where appropriate:

(i) How were the premises entered?

(ii) Were the premises alarmed at the time?

 Yes No

(iii) If so was the alarm activated?

 Yes No

(iv) Were the premises occupied at the time of the loss?

 Yes No

(v) If not, when were they last occupied?

(vi) Was anything stolen during this incident?

 Yes No

If so please provide details overleaf

Data Protection

Zurich Insurance plc ('Zurich') will hold your details in accordance with our Data Protection and Privacy Policy together with all applicable data protection laws and principles.

Information you supply may be used by us for the purposes of administering your policy (including underwriting, processing, claims handling and fraud prevention) within the Zurich Financial Services Group and our partners inside and outside the European Economic Area.

We may share with our agents and service providers, members of the Zurich Financial Services Group, other insurers and their agents, and with any intermediary acting for you, and with recognised trade, governing and regulatory bodies (of which we are a member or by which we are governed) information we hold about you and your claims history. This includes the Insurance-Link database and the Irish Insurance Federation's anti-fraud claims matching database. We may also in certain circumstances use private investigators to investigate a claim.

We may also need to collect sensitive personal data (for example, information relating to your physical or mental health or the commission or alleged commission of an offence) to assess the terms of insurance we issue/arrange or to administer claims which arise.

Unless you have advised us otherwise, we may share information that you provide to companies within the Zurich Financial Services Group and with other companies that we establish commercial links with so we and they may contact you (by email, SMS, telephone or other appropriate means) in order to tell you about carefully selected products, services or offers that we believe will be of interest to you.

Please tick here if you do not wish your information to be utilised for these purposes

You have a right of access to and a right to rectify data concerning you under the Data Protection Acts 1988 and 2003. Should you wish to exercise this right, please write to the Data Protection Officer, Zurich, Zurich House, Ballsbridge Park, FREEPOST, Dublin 4. To access your data, a fee of €6.35 is chargeable under the terms of the Data Protection Acts and cheque should be made payable to Zurich.

By providing us with your information and proceeding with this contract, you consent to all of your information being used, processed, disclosed, transferred and retained for the purposes of insurance administration (including underwriting, processing, claims handling and fraud prevention). Please note that a copy of our full Data Protection and Privacy Policy can be viewed on our website www.zurich.ie or requested by writing to our Data Protection Officer at Zurich, Zurich House, Ballsbridge Park, FREEPOST, Dublin 4.

DECLARATION

I declare that the above answers and the particulars provided are correct. I have not concealed any material information.

Signature

X

Date

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**IMPORTANT: YOU SHOULD NOT DISPOSE OF DAMAGED PROPERTY
AS SAME MAY BE REQUIRED FOR INSPECTION.**



Please sign and date.

