

Broker details - internal use

Date of Claim Notification

Lycetts Claims Handler

Lycetts Ref

Client Details

Client Name

Client Address

Postcode

VAT Registered

Yes No

Business Description/
Occupation(s)

Policy Number

Client Contact Name

Contact Details

Telephone

Email

Incident Details

Date of Incident

If claim notification is over 30 days after the incident, please advise the reason for the delay in notification

Time of Incident

Location of Incident

Postcode

Were the premises occupied at the time of the incident

Yes No

If No, date they were last occupied

Circumstances

If Theft:

How was entry gained

Are the premises fitted with an Alarm

Yes

No

If yes, was the alarm activated

Yes

No

Police Details & Crime reference

Are the premises secure

If Fire:

Did the Fire Brigade attend

Fire Brigade details

Incident ref if known

Loss or Damage

Details of property/item(s) lost, damaged or stolen (For multiple items, please complete the Additional Information section of this form)

Estimated total value of claim

Age of Item (For multiple items, please complete the Additional Information section of this form)

Original purchase invoice or replacement quotation attached

Yes

No

Detail of any person(s) responsible

Name

Address

Postcode

Contact Details

Telephone

Email

DECLARATION

I/We understand that my Insurer will handle this claim on my/our behalf and that I/We give our consent to the claim being handled on this basis. I/We understand that by providing untrue information resulting in a fraudulent claim is a criminal offence likely to lead to prosecution. I/We confirm that the information given on this form is to the best of my knowledge and belief, true in every respect. I/We confirm no amount claimed has been refunded from any other source.

Print name

If not the policyholder, please state your relationship to them

Signed

Date

Data Privacy Notice

Your privacy is important to us. We will process your personal data in accordance with data protection laws.

To provide insurance related services we will need to share the personal data collected with your Insurance company, their service providers and professional advisors and loss adjusters.

For further information on how your personal data is used and your rights in relation to your personal data please refer to our privacy policy at www.lycetts.co.uk/privacy-policy/ and our Terms of Business Agreement.

When you have completed the form please save it and email it to ukclaims@lycetts.co.uk