

## NON-MARINE CLAIM ADVICE

Please complete this form as fully and accurately as possible and return immediately

1. Name of Insured (in full) \_\_\_\_\_ Policy No. \_\_\_\_\_

Postal Address: \_\_\_\_\_

Risk Address (If difference from above) \_\_\_\_\_

Contact Phone No. \_\_\_\_\_

2. Date of Loss or Damage Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

Place of Loss or Damage \_\_\_\_\_

Brief Description of circumstances leading to loss or damage \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. In the event of lost property what steps have been taken to recover the property?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. To which police station did you report the loss? \_\_\_\_\_

\_\_\_\_\_

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**INSTRUCTIONS REGARDING FIRE CLAIM**

- NOTE 1 – If a building is damaged, a builder’s estimate should accompany this form.  
 NOTE 2 – if an article is repairable, the cost of repair only need be inserted in column 6.  
 NOTE 3 – In all other cases the following columns must be completed as fast as they are applicable

**N.B.** – All damaged property must be protected until the claim is settled, or until permission is given to dispose of it.

**INSTRUCTIONS REGARDING CLAIMS FOR LOSS OR DAMAGE**

1. DISCOVERY OF LOSS – The insured must promptly take all practicable steps for tracing and recovering the property lost and in the event of loss by theft for discovering and punishing the guilty part or parties.
2. PARTICULARS OF CLAIM – Articles lost or stolen are to be described first in column 1. Articles which have been damaged must be so described and shown at the end of the list. The actual value of each article after deduction for wear and tear, must be stated.

**PARTICULARS OF CLAIM**

Property destroyed, damaged or lost (give details)	When and where bought	Cost price of article	Value at time of Loss, damage or Fire, after Deducting for wear and tear	Value of article After fire	Amount claimed

I HEREBY DECLARE that the property claimed for have been lost, stolen, destroyed or damaged, and that all statements on this form are, to the best of my knowledge and belief, correct.

Signature of Insured.....

Date.....