



QBE

**Claim Form
- Commercial Hull & Boat Insurance**

All questions on this claim form must be answered

The Insured									
Insured's name		Surname				Given Name(s)			
Are you registered for GST?		No <input type="checkbox"/> Yes <input type="checkbox"/>		What is your ABN?					
Have you claimed or intend to claim an input tax credit on the GST component of the premium applicable to the Policy?		No <input type="checkbox"/> Yes <input type="checkbox"/> - Will you be claiming an amount less than 100%?							
		No <input type="checkbox"/> Yes <input type="checkbox"/> - Specify amount claimed				%			
Are you entitled to claim an input tax credit for repairs or replacement of the item that has been lost or damaged?		No <input type="checkbox"/> Yes <input type="checkbox"/> - Will you be claiming an amount less than 100%?							
		No <input type="checkbox"/> Yes <input type="checkbox"/> - Specify amount claimed				%			
Address								State	Postcode
Contact Number(s)		Business		()		Private		()	
		Facsimile		()		Mobile			

The Vessel								
		Make	Model No.	Year built	Reg./Serial No.	Hull-Length Motor - HP	Construction	Date purchased
Description of insured vessel, motor, trailer	Hull							/ /
	Dinghy							/ /
	Motor							/ /
	Motor							/ /
	Trailer							/ /
Description of equipment (including sails if applicable)								/ /
								/ /
								/ /
								/ /
Name of vessel								
Finance	Is the vessel financially encumbered? No <input type="checkbox"/> Yes <input type="checkbox"/>							
	If 'Yes', please give name and address of finance company							
							State	Postcode

The Loss/Incident						
Particulars of loss/incident	When did loss/incident occur?		Date	/ /	Time	am/pm
	Speed of vessel					
	Where did the loss/incident occur?					
	For what purpose was vessel being used?					

The Loss/Incident (continued)

Have you ever:

a) had previous claims? No Yes

Details

b) been refused insurance? No Yes

Details

c) been charged/convicted of any offence? No Yes

Details

Particulars in Relation to Third Parties (if applicable)

A. DAMAGE TO PROPERTY

Owner of other vessel	Name				
	Telephone No.	()			
	Address				
			State		Postcode
Details of other vessel	Make of hull		Reg. No.		
Name of vessel			Name of insurance company		

Were you at fault? No Yes – Give reasons

Describe damage to other vessel, motor etc.

Estimated cost of repairs

Where is the vessel now?

B. INJURY TO OTHER PEOPLE

Injured person(s)	Name				
	Address		State		Postcode
	Name				
	Address		State		Postcode
	Name				
	Address		State		Postcode

Was the scene attended by the Police or other Person(s) of Authority? No Yes

Give details (including details of injury)

Particulars in Relation to Third Parties (if applicable) (continued)

Name and address of any Hospitals/Doctors etc. treating Third Parties.

Where were the Third Parties when the incident occurred?

Do you know the Third Party(ies)? No Yes – If 'Yes', how?

The Loss/Incident (Additional Space)

Do you want to provide additional information or make a statement to support your claim?

No Yes

Privacy

QBE includes information about how we manage your personal information in our Product Disclosure Statements and Policy booklets. You can obtain a copy of the **QBE Privacy Policy Statement** from our website www.qbe.com or contact the Compliance Manager on 02 9375 4656 or email compliance.manager@qbe.com for further information.

Declaration and Authorisation

I/We solemnly declare that the information above and on the face hereof is a true and accurate account of the event sustained by Me/Us, and that I/We have not concealed anything material which should be known by the Insurers.

Insured's Signature

X

Date

/ /

If you have a concern

Although we do everything possible to provide a quality service to you, our customer, we recognise that occasionally there may be some aspect of our service or decision we have made that you want to query or draw our attention to. Please let us know so that we can address your concern.

For Private Boat Insurance details of our Complaints and Dispute Resolution procedure are set out in your policy document. A copy of the procedure is available upon request.