

Personal Property Claim Report

Please return to:

Claim No: (Office Use Only)

Please answer all relevant questions fully and return this form within seven days.

INSURED

Policy No: Full Name:

Date of Birth: Occupation:

Insured Address:

 Postcode: - Telephone No.:

Correspondence Address:

 Postcode: - Telephone No.:

DETAILS OF LOSS

Date of Loss: / / Time of Loss: am / pm

Place where loss occurred:

When & by whom discovered:

Please state fully what happened:

If known please state name and address of person causing loss or damage

Name:

Address:

If you are claiming for lost or stolen articles, police must be advised promptly. They must also be advised in the case of malicious damage. Please state date police were advised and name and address of station.

Name of Station:

Address of Police Station:

Officer's Number: Crime Reference Number: Date Reported:

Have you previously made a claim of this nature upon any company or underwriter? Yes No

If "Yes", please give details:

BUILDINGS - DETAILS OF CLAIM

loss or damage details	Approx. age of property referred to in previous column	If decorations damaged, state when last decorated (each room or part damaged)	Amount of tradesmen's estimate. Please attach estimate	Amount claimed
			£	£
			£	£
			£	£
			£	£

Please complete relevant sections

Are you the sole owner?Yes No

If "NO", please give name and address of owner or any other party having an interest in the property e.g. Building Society

Was the house fully furnished for habitation?Yes No **Is it used solely as a private dwelling?**Yes No **If a tenant, are you legally liable under an agreement for decorations or other repairs to the building?**Yes No

If "YES". Please forward the agreement for perusal

Are there any other insurances on the building?Yes No

If "YES", please give details including name, address and policy number of any other insurers, if known

Name of Insurer and Address

Policy No.

State present value of building £
CONTENTS - (Including articles specifically insured)**State total value of the contents of your premises at the time of the loss**£ **DETAILS OF CLAIM**

Where necessary any additional information may be attached on a separate piece of paper

Description of articles	From whom obtained (name and address)	Date acquired	Original purchase price	Cost to replace or repair	Value of salvage	Amount claimed
			£	£	£	£
			£	£	£	£
			£	£	£	£
			£	£	£	£
			£	£	£	£

Are you the sole owner of the articles?Yes No

If "NO", please give name and address of the owner

Name

Address

Are you aware of any alternative insurance arrangements in respect of specific articles such as mobile telephones, television or audio and hi-fi equipment which might form a part of the claim now being made? If so, please provide details**Other Insurers Name**

Address

Policy No.

PRIVACY AND YOUR PERSONAL INFORMATION

China Taiping Insurance (UK) Co Ltd are the data controller (as defined by the UK Data Protection Act 2018 and all applicable laws which replace or amend it, including the General Data Protection Regulation) in respect of this contract of insurance. **We** may obtain, collect and process **your** personal information for the purposes of entering into and performing **our** insurance contract with **you**.

For full details of what data **we** collect about **you**, how **we** use it, who **we** share it with, how long **we** keep it and **your** rights relating to **your** personal data, please refer to **our** Privacy Notice which is available on our website at: <https://uk.cntaiping.com/uk-privacy/>

If **you** do not have access to the Internet, please write to **our** Data Protection Officer (at the address shown below) with **your** name and address and a copy will be sent to **you** in the post.

In summary, **we**, may, as part of our agreement with **you** under this contract, collect personal information about **you**, including:-

- Name, address, contact details, date of birth and cover required
- Financial information such as previous credit history, bank details
- Details of any previous insurance claims.
- Information for Employers' Liability Database records (if Employers' Liability insurance is included)

We may also collect sensitive personal information about **you**, and any additional people who **you** wish to be insured under the policy, including medical records to validate a claim should **you** be claiming for sickness or an accident.

We collect and process **your** personal information for the purpose of insurance and claims administration.

Telephone calls may be monitored and recorded and the recordings used for fraud prevention and detection, training and quality control purposes.

Your personal information may be shared with third parties which supply services to us or which process information on **our** behalf (for example, premium collection and claims validation, or for communication purposes related to **your** cover). **We** will ensure that they keep **your** information secure and do not use it for purposes other than those that **we** have specified in **our** Privacy Notice.

Some third parties that process **your** data on **our** behalf may do so outside of the European Economic Area ("EEA"). Where such transfers occur, **we** ensure that they do not occur without **our** prior written authority and that an appropriate transfer agreement is put in place to protect **your** personal information to an equivalent standard to that found in the EEA.

We will keep **your** personal information only for as long as **we** believe is necessary to fulfil the purposes for which the personal information was collected (including for the purpose of meeting any legal obligations).

We will share **your** information if **we** are required to by law. **We** may share **your** information with enforcement authorities if they ask us to, or with a third party in the context of actual or threatened legal proceedings, provided **we** can do so without breaching data protection laws.

If **you** have any concerns about how **your** personal data is being collected and processed, or wish to exercise any of **your** rights detailed in **our** Privacy Notice, please contact **our** Data Protection Officer at:-

China Taiping Insurance (UK) Co Limited;
2, Finch Lane, London EC3V 3NA
E-mail: dataprotectionofficer@uk.cntaiping.com
Tel: (0044) (0)20 7839 1888

DECLARATION

I/We hereby declare that to the best of my knowledge and belief these particulars are true and complete. I/We understand that you may ask for information from other insurers to check the answers I/We have provided.

Signature

Date

Members of the Association of British Insurers
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