



Business Insurance for
a growing New Zealand

Cellphone & Portable Electronic items Claim Form

If you need any help with this form, please contact the nearest NZI Branch or your insurance advisor.

- ▶ If you supply any untrue or false information and know that it is not true NZI shall have the right to refuse the claim.
- ▶ We recommend that you read the Claims section of your policy.
- ▶ Please answer all the questions on this form. If a question does not apply to your claim, please answer "N/A".
- ▶ You must not incur any expense (unless it is to minimise the loss), or admit fault, without our permission.

Part A: The insured

Name: _____ Policy number: _____

POSTAL ADDRESS

Number/Street: _____ Suburb: _____

Town/City: _____ Post code: _____

CONTACTS

Home phone: _____ Fax: _____ Best time to contact: _____

Mobile phone: _____ Email: _____

If your claim is accepted and you wish to be paid direct into your account, please fill out the details below:

Bank Account:

Part B: The loss or damage

1. Where did the loss or damage happen? (please give the full address or details of the location): _____

2. When did the loss or damage happen? Date: _____ Time: _____ AM PM

3. How did the loss or damage happen? _____

4. Is the item repairable? _____

Part C: The property lost or damaged

Make: _____ Model: _____

Memory Size: _____ Date Purchased: _____

From Where: _____ Original price paid: _____

Was it purchased new, used, received as a gift or insurance replacement: _____

Mobile Number: _____ Who is the provider: _____

What is the IMEI number of the phone : _____

(This will be under the battery, on the box the phone came in, or you can ask your Telco provider)

Part D: General questions

- 1. Do you have any other insurance which covers this loss or damage? Yes No
- 2. Have you claimed on any type of property insurance in the past 5 years? Yes No

If "YES" to question 1 or 2 please give full details (include date, type of claims and name of Insurer):

Part E: Declaration and signature

I declare that:

- 1. MATERIAL FACTS**
 - (a) All information given to NZI in connection with this claim (whether oral or written) is true and correct;
 - (b) No information relevant to the claim is omitted.
- 2. USE OF INFORMATION**
 - (a) My personal information collected by NZI in connection with this claim may be disclosed to:
 - (i) other members of the insurance industry and Insurance Claims Register Limited;
 - (ii) parties repairing or replacing the subject matter of the claim;
 - (iii) parties who have a financial interest in the subject matter of the policy;
 - (b) My personal information held by any other parties in connection with this claim may be disclosed to NZI;

Please note:

- ▶ We gather information about you (including your claims history) to consider your claim. The terms of your insurance policy require you to supply this information, and if you do not to provide it, or if you provide any false or untrue information, we may decline your claim.
- ▶ This information is held by us and you may access it. It may be passed onto other insurers you deal with, repairers and mortgagees etc.
- ▶ Your claims history is passed onto, and held by, Insurance Claims Register Ltd. This enables other insurers you deal with to access it, and prevents fraudulent claims.

SIGNED ON BEHALF OF ALL INSUREDS:

Signature: _____ Date: _____