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**Surety & General
Brokers Pty Ltd**

ABN 65 079 830 498
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PRELIMINARY CLAIM NOTIFICATION

Before completing this form please make sure you have read the Claims Procedures on the Surety & General website.

Date: _____ Time: _____

Insured: _____

Address of Loss or Damage: _____

Date of loss: _____ Time: _____

Date advised to S&G: _____ Time: _____

Circumstances giving rise to this claim or potential claim and extent of loss or damage:

Have the Police been notified? Yes No

Contact Name: _____ Station: _____

Damaged property is available for inspection at:

Was another party involved or responsible for the loss or damage? Yes No

If so please give details: _____

Have any temporary repairs been made? _____

Contact Person: _____ Phone: _____

Estimate of loss: \$ _____

Contact Details

Phone: (02) 9929 9969

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Email: info@surety.com.au