

Public liability

Claim form

Policy number

Name of business(es) insured

Correspondence address inc. post code

Name of the director / person handling the claim on your behalf

Contact email address

Contact telephone number

DETAILS OF CLAIM

Date of occurrence

Time of occurrence

Place of occurrence

Describe the work you or your employees or sub-contractors were engaged to do

Name and address of the company / person you were working for

Name and address of the main contractor if not your firm

Please explain how the injury, loss or damage occurred

Name and address of the person who caused the accident to occur

If this was not your employee provide the name and address of the person's employer

DETAILS OF WITNESSES

Name of any witness to the loss / damage

Address of any witness to the loss / damage

Contact telephone number of any witness to the loss / damage

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CIRCUMSTANCES OF THE CLAIM

Damage

Description of property damaged

Nature and extent of damage

Address where the property can be inspected

Has any claim been intimated

Estimated cost of damage / repair

Injury

Description of the nature of the injury

Was the injured party taken to hospital

Date ceased work

Date work resumed (if known)

Authorities

Was the injury / damage reported to the Police

What is the Police crime reference number

Name of Police office and number

Police station name

Police station address

Name of Health & Safety officer reported to

Please attach

| | |
|-----|----|
| YES | NO |
|-----|----|

Records /risk assessments / method statements relevant to the contract

Maintenance records of any plant involved in the incident

Records of any other accidents occurring at the site / contract site / premises

Records of any other complaints occurring at the site / contract site / premises

I/ we declare that the statements detailed in this submission are true and accurate to the best of my/our belief

Authorised signature

Name of signature

Position

Date of signature

Please keep a copy of this submission for your own records