

# Masterpiece & Masterpiece Signature

## Claim Form

### Section 1: Particulars of policy holder/insured person

Name of policy holder/insured person			
Address of policy holder/insured person			
Policy number			
Telephone number			
Email			

### Section 2: Payment Details

Please provide details for payment of your claim in the event that the claim is deemed payable by Chubb.

I hereby authorise and request Chubb to pay benefit due in respect of this claim as follows:

**Electronic Funds Transfer** (For payments in AUD and to bank accounts in Australia) **(Recommended)**

Payee Name (As per bank account name)			
Name of Bank			
Branch Code Number		Account Number	

### Section 3: Details of loss/occurrence

Place/address of loss/occurrence			
Date of loss/occurrence:		Time of loss/occurrence (24-Hour):	
What happened, how did it happen and why? (Please use supplementary sheet if necessary)			

### Section 4: Police report

**Please note:**

1. The police must be informed immediately if the property has been lost, stolen or maliciously damaged.

2. Have you reported this loss to the police?

If **Yes**, please provide the police report number

If **No**, please state the reason(s) that the loss was not reported to the police.



(Please use supplementary sheet if necessary)

Details of all properties damaged				
Name, address and contact no. of owner of property damaged	Relationship to Insured	Name and extent of property damaged	Approximate value of property damaged	Estimated cost of repairs to the property damaged

Has anyone contacted you regarding the incident? Yes    No

If **Yes**, please state details and attach all communications received from third party claimant(s).

Important: Please do not admit responsibility for the incident until we have properly assessed the claim in full.

**Section 6: Recovery**

Has a third party caused/been responsible for the damage Yes    No

If **Yes**, please advise how they caused the damage.

If **Yes**, please provide the following details;

Name			
Address			
Phone Number		Email	
Drivers licence number (if applicable):			
Vehicle registration number (if applicable):			

**Section 7: Any Other Insurance**

Are there any other policies of insurance in force covering you or the subject matter in respect of this event? Yes    No

If **Yes**, please specify below.

Name and address of insurance company(s)	Policy no(s)
Are you claiming under any of the policies listed above?	Yes    No

## Section 8: Claim Privacy Consent and Declaration

Did you remember to enclose the following? (Where applicable)

If **Yes**, please specify below.

Document	Yes	N/A
Police Report		
Original purchase receipts, warranty card and photographs (For loss and/or damage of personal property claim)		
Documents with relevant authorities concerned (For damage of personal property claim)		
Repair quotations or written confirmation issued by the repairer stating property is beyond repair		
Relevant receipts (For communication and/or replacement cost)		

### Claim Privacy Consent

Chubb Insurance Australia Limited (Chubb) collects, uses and handles your personal information in accordance with the Privacy Act 1988 (Cth). You can access a copy of our Privacy Policy on our website at [www2.chubb.com/au-en/footer/privacy.html](http://www2.chubb.com/au-en/footer/privacy.html) or by contacting our customer relations team.

Your personal information will be used by Chubb, or third parties engaged by Chubb, for the purpose of assessing your claim or your entitlement to benefits and, if the claim is accepted, for administration of the claim and for planning, product development and research purposes including customer surveys.

In so far as it is relevant to the claim, your personal information may include:

- information that is health information or sensitive information, including, without limitation, your medical history, any treatment received by you and any medication taken or prescribed for you (at any time) or your health insurance claims history, including Medicare;
- information relating to other insurance policies, including terms and conditions and claims history;
- details of your employment including position, period of employment, remuneration, hours worked and duties performed (at any time);
- information relating to your income, assets, liabilities and solvency;
- information from third persons who may have information relevant to your eligibility to receive a benefit, or your entitlement to receive an ongoing benefit;
- payment or billing information, such as bank account details, direct debit and credit card details or premium funding and insurance payment arrangements; and
- any other personal information that you may provide to Chubb or its third party contractors.

### Collection from and Disclosure to Third Parties

To assess and process your claim Chubb may need to collect your personal information from third parties such as, but not limited to, your insurance broker, claims reference services, government organisations (for example, social security agencies or taxation offices), your doctor or other health service provider, any forensic accountant or investigator retained by Chubb, your employers (past and present), your accountant and any businesses which provide information about the commercial activities of persons or, if you are, or have been, bankrupt the trustee of your estate.

Chubb may disclose your personal information, including health and sensitive information, to other entities within the Chubb Group, other insurers, our reinsurers or third parties, including contractors and contracted service providers (such as assessors or investigators) who we, or those other Chubb Group entities, have engaged to provide a specific service related to the administration of your claim and the policy. Those entities may be located overseas, for example the regional head offices of Chubb in Singapore, UK or USA or third parties with whom we or those other Chubb Group entities have subcontracted to provide a specific service for us, which may be located outside of Australia (such as in the Philippines or USA). These entities and their locations may change from time to time. Please contact us, if you would like a full list of the countries in which these third parties are located.

Chubb may also disclose your personal information to witnesses in respect to your claim and to government agencies including the police (where we are compelled to by law). If you'd like a copy of your personal information or wish to correct or update it, want to withdraw your consent to receiving offers of products of services from us or persons we have an association with, please complete Our Personal Information Request Form online or download it from [www2.chubb.com/au-en/footer/privacy.html](http://www2.chubb.com/au-en/footer/privacy.html) and return to [CustomerService.AUNZ@chubb.com](mailto:CustomerService.AUNZ@chubb.com) or contact our customer relations team on 1800 815 675.

Please note if you do not consent to the terms of this Privacy Consent or revoke your consent, Chubb may not be able to process or assess your claim.

## Consent, Declaration and Authority - Accuracy of Information & Privacy

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I:

- consent to the collection, use and disclosure of my personal information in accordance with Chubb's Privacy Policy and this document for the assessment of my claim. This consent remains valid unless I alter or revoke it by giving written notice to Chubb as outlined above;
- understand that by investigating my claim or by accepting proof of my claim, Chubb has made no acceptance of liability, nor waived any of its rights in defense of any claim arising under the insurance policy;
- agree to use my best endeavors and render all reasonable assistance and co-operation to Chubb in the assessment of my claim;
- confirm that any information that I supply will be true and correct and that I will not withhold any information likely to affect the acceptance or handling of my claim;
- understand that my claim may be denied if the information supplied is untrue, or I have not revealed all relevant facts;
- authorise any person or entity, including but not limited to the third parties referred to above, to provide to Chubb such personal information as Chubb considers relevant for its assessment of my claim;
- authorise Chubb to disclose my personal information (including sensitive/health information) to other third parties referred to above (who may be located overseas) where relevant to the assessment of my claim;
- appoint Chubb to do everything necessary including to execute on my behalf any documents or do such acts as required to give effect to this Consent, Declaration and Authority.

Signature of claimant	
Name of claimant	Date

Please attach any supporting documentation and email along with this completed Claim Form to [aus.propertyclaims@chubb.com](mailto:aus.propertyclaims@chubb.com)

## General Insurance Code of Practice (GICOP)

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We are a signatory to the General Insurance Code of Practice (Code). The objectives of the Code are to further raise standards of service and promote consumer confidence in the general insurance industry. Further information about the Code and your rights under it is available at [codeofpractice.com.au](http://codeofpractice.com.au) and on request. As a signatory to the Code, we are bound to comply with its terms. As part of our obligations under Parts 9 and 10 of the Code, Chubb has a [Customers Experiencing Vulnerability & Family Violence Policy](#) (Part 9) and a [Financial Hardship Policy](#) (Part 10). The Code is monitored and enforced by the Code Governance Committee.

## About Chubb in Australia

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Chubb is a world leader in insurance. With operations in 54 countries and territories, Chubb provides commercial and personal property and casualty insurance, personal accident and supplemental health insurance, reinsurance and life insurance to a diverse group of clients. As an underwriting company, we assess, assume and manage risk with insight and discipline. We service and pay our claims fairly and promptly. The company is also defined by its extensive product and service offerings, broad distribution capabilities, exceptional financial strength and local operations globally. Parent company Chubb Limited is listed on the New York Stock Exchange (NYSE: CB) and is a component of the S&P 500 index. Chubb maintains executive offices in Zurich, New York, London, Paris and other locations, and employs approximately 40,000 people worldwide.

Chubb, via acquisitions by its predecessor companies, has been present in Australia for 100 years. Its operation in Australia (Chubb Insurance Australia Limited) provides specialised and customised coverages, including Business Package, Marine, Property, Liability, Energy, Professional Indemnity, Directors & Officers, Financial Lines, Utilities, as well as Accident & Health insurance, to a broad client base, including many of the country's largest companies. Chubb also serves successful individuals with substantial assets to insure and consumers purchasing travel insurance. With five branches and more than 800 staff in Australia, it has a wealth of local expertise backed by its global reach and breadth of resources.

More information can be found at [www.chubb.com/au](http://www.chubb.com/au)

## Contact Us

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