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| **Step One: Person Taking the Call** | | | | | |
| Date: | [enter date] | Brokerage Firm: | [Broker co name] | Entered by: | [Broker staff member] |

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| **Step Two: Contact Details** | | | | | | | | | | | | | | | | | | | | |
| Surname: | [Enter surname] | | | | | | | First Name: | | | | | [Enter first name(s)] | | | | | | | |
| Street Address: | [Street number and name] | | | | | | | | | | | | | | | | | | | |
| Suburb/Rural Area: | [Suburb/R.D.] | | | | | | | Town/City: | | | | | [City/Town] | | | | | | | |
| Home Phone: | [Area code and number] | | | | | | | Work Phone: | | | | | [Area code and number] | | | | | | | |
| Mobile: | [Area code and number] | | | | | | | Email: | | | | | [email address] | | | | | | | |
| Bank Account No:  *(for cost reimbursement)* | Bank | |  | Branch | | | |  | Account Number | | | | | | | |  | Suffix | | |
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| **Step Three: Policy Details** | | | | |
| Policy number: | [NZI policy no] | Policy wording: | [Applicable wording] | |
| Name on Policy: | [Name as it appears on policy document] | | | |
| Excess applicable: | $ | | Premiums: | Paid  Unpaid |

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| **Step Four: Affirmation Record (mandatory if no claim form to be completed)** | | | | |
| The following statement has been read to the Insured: | Yes |  | No |  |
| “Before I complete your claim, I need you to agree two things:   1. Some details of your claim will be held on the Insurance Claims Register in Wellington. Please be aware that other insurance companies have access to this information 2. As part of your claim, we can give information to or get information from others about your claim.   Please answer all our questions honestly. If you are not completely honest, then your claim may not be paid and your policy could be affected.  Do you understand and agree, and are you happy for me to go ahead?” | | | | |

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| **Step Five: Insured Details** | | | |
| Have you ever been refused insurance or had a policy cancelled or not renewed? | | Yes | No |
| In the past 7 years, have you been convicted of a criminal offence? | | Yes | No |
| *If answered ‘yes’, please provide details:* [Enter details if applicable] |  | |  |

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| **Step Six: General Claim Details** | | | | | | | | | | | | | |
| Date of Loss: | [enter date] | | | | | Time of loss: | | | [Time] | | | | |
| Description of Event: | [Details of what happened] | | | | | | | | | | | | |
| Description of Item: | [Make and model of item] | | | | | | | | | | | | |
| Date purchased/age: | [enter date] | | | On hire purchase? | | | | Yes | | |  | No |  |
| Repairable? | Yes  [details of damage and repairer if applicable]  *Client can send cell phones, tablets, desktop computers and laptops to* [*Uniway Computers*](http://www.uniway.co.nz/) *or* [*Connect NZ*](http://www.connectnz.co.nz/) *for prompt assessment - NZI Claims to arrange referral and freight forward courier collection* | | | | | | | | | | | | |
|  | No  *If not repairable, send damaged cellphone to Claims for salvage purposes* | | | | | | | | | | | | |
| Cellphones only: |  | Prepaid/Contract: | | |  | | Cellphone no: | | | | | | |
| IMEI no: | [IMEI no] | | [Find IMEI for lost iPhone](https://www.google.co.nz/url?sa=t&rct=j&q=&esrc=s&source=web&cd=16&cad=rja&uact=8&ved=0ahUKEwjOz6zdgKHWAhVEJZQKHVddCuEQFgh0MA8&url=https%3A%2F%2Fsupport.apple.com%2Fen-gb%2Fht204073&usg=AFQjCNF762AciNiNX-ijQk3GMZFiXzoxtg) | | | | | | | [Find IMEI for lost Android phone](https://www.ampercent.com/find-imei-number-of-lost-android-device/15221/) | | | |

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| **For Burglary, Theft, Unexplained Loss or Intentional Damage Claims Only** | | | | |
| Have the Police been advised? | Yes |  | No |  |
| If Police advised, their reference number: |  |  |  |  |
| Has cellphone been blacklisted (provide evidence of same)? | Yes |  | No |  |

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| **Any Additional Comments/Information:** |
| [Any additional details not captured in fields above] |