

Things to know before you lodge a claim:

Along with the completed claim form, we will require some documents. Please email the claim form and the documents to claims@pi-plus.com.au

Please ensure you include the following in the email subject line – Insured Name || Insured Address || Policy Number.

For example, we may need to appoint a loss adjustor in some instances where extensive damage has occurred. Please call us on 1300 307 072 between 9 am and 5 pm, and we will discuss the process with you. **Please note that we would need to see photos of the damage before determining if an assessor must attend the property.**

Please find a checklist of documents that will/may be required to assess the claim depending on the type of loss you wish to claim.

RENT DEFAULT CLAIM/LOSS OF RENT

- Completed Claim Form
- Tenancy Tribunal Documents (if any)
- Lease Agreement for Defaulting Tenant
- Rent Ledger for Defaulting Tenant
- New Tenancy Agreement
- Evidence of Bond Refund Receipt
- Proof of Advertising
- Invoices to support bond has been exhausted
- Copy of any correspondence to the tenant advising rent is late/due/notice to vacate
- Bank Account Details: Account Name, BSB & Account Number

THEFT

- Date of Loss/Date Damage Found
- Photos of damaged items
- Occupancy Permit (if brand new property)
- Lease Agreement for last tenant occupying property
- Proof of Ownership for stolen items (Receipts, photos, manuals etc)
- Ingoing & most recent routine inspection report
- 2x Quotes for repairs/replacement
- Police Report
- Bank Account Details: Account Name, BSB & Account Number

IMPACT/FUSION/STORM DAMAGE CLAIM

- Date of Loss/Date Damage Found
- Photos of damaged items
- Last two routine inspection reports
- Report confirming cause of damage
- Report confirming item needs to be replaced if not repairable
- 2 Repair/Replacement Quotes
- Bank Account Details: Account Name, BSB & Account Number

MALICIOUS DAMAGE CLAIM

- Date of Loss/Date Damage Found
- Photos of damaged items
- Schedule of Loss (List of items being claimed)
- In going, Outgoing and Routine Inspection Report
- 2X Quotes for repairs/replacement
- Evidence of Bond Refund Receipt
- Invoices to support bond has been exhausted
- Denial Email from Building Insurer for damages to the building (if building not insured through PIP)
- Police Report
- Bank Account Details: Account Name, BSB & Account Number

WATER DAMAGE CLAIM

- Date of Loss/Date Damage Found
- Photos of damaged items
- In going, Outgoing and Routine Inspection Report
- Plumber report confirming the cause of damage
- Repair Invoice confirming the cause of damage has been rectified
- Report Confirming if the damaged item cannot be restored
- 2x Repair/Replacement Quotes
- Bank Account Details: Account Name, BSB & Account Number

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GENERAL CLAIM FORM

The issue of this form does not constitute an admission of liability on the part of the insurer.

1. LANDLORD DETAILS

Name: _____
Address: _____ State: _____ Postcode: _____
Phone: _____ E-mail: _____ Policy Number: _____
Are you registered for GST? Yes/No What is your ABN? _____
Are you entitled to claim ITC? _____ ITC%? _____

(Note: To ensure you do not incur any unnecessary GST liabilities on this claim please provide the above information. Do you claim part or full cost of the insurance premium on Tax returns. You may need to contact your accountant for clarification if required)

Was there any other insurance covering this damage current at the time of the occurrence?
Give Details _____
Name of Insurer _____ Policy Number _____
Does any other party have an interest in the damaged property to the subject of the claim? Yes/No
Give Details (e.g. Mortgagee, Finance Co., Lessee) _____

2. REAL ESTATE AGENT DETAILS

Name Of Agent: _____ Property Manager Name: _____
Address: _____
Contact Number _____ E-mail: _____

3. ABOUT THE INCIDENT

Date of Incident: _____ Time: _____
Location: _____ State: _____ Postcode: _____
What happened? (Provide as much detail as possible eg. For burglary claims please provide the point of entry, malicious damage claims please detail exactly what damages are being claimed and the room they are in, for water damage claims, please advise where the water has come from, etc.) For additional space please proceed to pg. 4 if required.

Please provide the date the premises were last occupied: _____
If the damage is the result of fire did the fire brigade attend? Yes/No
Was the matter reported to the police? Yes/No
Police Station: _____ Phone Number: _____
Police report number: _____ Date Reported: _____

ANY LOSS INVOLVING MALICIOUS DAMAGE, LOST OR STOLEN PROPERTY MUST BE REPORTED TO THE POLICE.

4. TENANTS DETAILS

Tenant's Name: _____ Phone: _____ Email: _____
Forwarding Address: _____

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(Please proceed to **section 6**, if not claiming for Loss of rent)

5. LOSS OF RENT

TOTAL LOSS OF RENT (do not deduct from the Bond)

Lease Start Date:	Lease end date:
Date Tenant Vacated:	Notice Given? Y/N Date
Rent Amount Per Week	\$
Bond Amount	\$
Rent Paid up to (excluding bond)	
Rent Credit (On Account)	\$
New Lease Agreement Date	

BOND DISPERSAL - What was any retained security bond spent on?

(e.g. *Utility Invoices, Cleaning, Rubbish removal, Gardening, Tribunal Costs, Minor damages & Maintenance etc..*)

Description	Amount
	\$
	\$
	\$
	\$
	\$
Is there any bond credit? Y/N	\$

RENT LOSS CALCULATOR

From:	
To:	
Total Days:	
Rent per day:	\$
Subtotal:	\$
Minus bond credit:	\$
Minus rent credit:	\$
Total loss of rent:	\$

6. SCHEDULE OF LOSS

Please complete for loss/damage of property/contents:

Full description of property lost or damaged	Date of Purchase	Purchase Cost	Repair/Replacement Cost	Total Claimed
				\$
				\$
				\$
				\$

Supporting Documents required:

- Repair/replacement tax invoices or quotes if repairs/replacement is yet to take place
- Photos of damages being claimed
- Ingoing and outgoing condition reports for property damage claims
- Original purchase invoices, for contents items

7. ELECTRIC MOTOR BURNOUT (damage by an *electric current* to motors of contents/building items):

Appliance	Make/Model	Age	Last Date of Maintenance

Please note: the underwriter may request further information in addition to the above if required.

8. SETTLEMENT DETAILS

Payment by Eft:

BSB: _____ **Account:** _____

Account Name: _____

9. DECLARATION

By ticking this box

I / We and our Property Manager do solemnly and sincerely declare:

- That the information supplied on this Claim Form and Statement of Claim is true in every respect.
- I / We understand that the claim may be refused if information is withheld, false, misleading or concealed.
- That there was no other insurance covering this loss current at the date of this incident.
- I / We acknowledge that this Claim Form is a Legal Document and such may be used in any legal proceedings resulting from this claim.

Landlord's Name **Property Manager's Name**

Additional space for notes: