



Stackhouse Poland  
Private Clients

## Home Claim Form

Please answer the questions as fully as possible

### Your Details

Policy No:  Claim No:

Name:

Address:   
Postcode:

Telephone:

Mobile:  Fax:

Email:

Are you happy for us to contact you by email?  Yes  No

Are you VAT registered?  Yes  No

### Circumstances of Loss

Date of Loss:   /   /   Time:  am/pm

Address of loss:

By whom discovered:

Name & address of person causing the loss or damage:



**Circumstances of Loss cont...**

Circumstances of  
Loss *(continue on  
separate sheet if  
necessary)*:

Have the police been notified?

Yes

No

If Yes, please give  
station, date and  
crime reference:

Were the premises unoccupied at time of loss?

Yes

No

Is there any other insurances that cover this loss?

Yes

No

If Yes, please  
provide details:

Have you or any person living with you suffered any  
loss or damage or had any claims made against you  
in the last 5 years?

Yes

No

If Yes, please  
provide details:



**Stackhouse Poland**  
Private Clients

**Claim Details**

**Buildings**

Full description of property destroyed or damaged	Approximate Age	Estimate for repair/ replacement	Amount Claimed

**Contents**

Full description of item <i>(including make and model)</i>	Details of damage	Date obtained	Original price	Cost to replace	Amount claimed



Stackhouse Poland  
Private Clients

### Claim Details cont...

**In the event that your claim is accepted and you would prefer us to pay funds straight into your account, please fill in the details below:**

**Payment to be made by** (please tick preference):

Direct transfer to the bank account below:

Name and address of bank:

Postcode:

Account Name:

Account Number:

--	--	--	--	--	--	--	--

Sort Code:

--	--	--	--	--	--

Cheque made payable to you:

#### Data Protection Act

By signing this Claim Form, you consent to us using the information we may hold about you for the purposes of providing insurance and handling claims, if any, and to process sensitive personal data about you where this is necessary. This may mean we have to give some details to third parties involved in providing insurance cover. These may include insurance carriers, third-party claim adjusters, fraud detection and prevention services, reinsurance companies and insurance regulatory authorities. Where such sensitive personal information relates to anyone other than you, you must obtain the explicit consent of the person to whom the information relates both to the disclosure of such information to us and its use by us as set out above. The information provided will be treated in confidence and in compliance with the Data Protection Act 1998. You have the right to apply for a copy of your information (for which we may charge a small fee) and to have an inaccuracies corrected.

#### Declaration

I/We declare that the details given on this form are true and complete to the best of my/our knowledge

Name(s):

Signature(s):

Date:

		/			/		
--	--	---	--	--	---	--	--

Stackhouse Poland Ltd, New House, Bedford Rd, Guildford, Surrey GU1 4SJ  
Tel: 01483 407440 • Fax: 01483 407471 • www.stackhouse.co.uk

Authorised and Regulated by the Financial Services Authority No. 309340