



Parksure Dept, Windsor House, 200 Barnwood Fields, Barnett Way, Gloucester GL4 3RT
Tel: 01452 314413 Email: mail@parksure.com Web Site: www.parksure.com

PARKSURE CLAIM FORM

Customer Info:

Insured's Name Broker Ref.....
Correspondence Address Policy No.....
..... Post Code.....
Email..... Insured's Contact No
Park Name & Address (If Different).....
.....

Details of Property:

Make..... Model.....
Age/Year of Manufacture Pitch No.....
Are you Registered for V.A.T.? Yes No If Yes V.A.T. Registration No.
Bank Details for Settlement: Sort Code Account Number

Circumstances of Claim/Loss:

Date and Time of Loss/Damage..... Location.....
State Fully how Loss/Damage Occurred.....
.....
.....
.....

In the Case of Theft/Malicious or Accident Loss

Crime Reference Number..... Date Reported.....
Police Station Address.....

Description of items for which you are claiming (Including Make and Model No where appropriate) Please supply any relevant documentation to support your claim I.e. Purchase receipts, manuals, estimates, invoices. Continue on separate sheet if necessary					
Details/Description of property Lost/ Damaged/Destroyed (Please supply make and model of electrical equipment)	Date when Bought	Original. Purchase Price	Cost to Replace or Repair	Value of Salvage	Amount Claimed

Is/Are the attached estimate(s) on a like for like basis? Yes No

Do you hold any other policies that may cover this type of loss (Home Contents or Travel Insurance), If Yes:
 Name of Insurer.....Policy Number.....
 Insurer Address.....

Do you hold consider any other party to be responsible for the loss/damage, If Yes:
 Name of Person/Persons Responsible.....
 Address (If Known)
 Name of Insurer (If Known).....Policy Number (If Known).....
 Insurer Address (If Known).....

Please list any other persons who may have knowledge or witnessed the incident/loss
 Name
 Address

Who should any settlement cheques (If applicable) be made out to?:.....

Declaration
 I/We understand that you will pass the information on this form, and about any incident of which I/we may give details, to IDS Ltd so that they can make it available to other insurers. I/We also understand that, in response to any searches you may make in connection with this application or any incident of which I/we have given details, IDS Ltd may pass you information it has received from other insurers about other incidents involving anyone insured under the policy. I/We understand that you may ask for information from other insurers to check the answers I/we have provided. I/We confirm that, as far as I am/we are aware, the statements made by me/us or on my/our behalf in connection with the insurance are true and complete. I/We agree to accept a policy in the Company's usual form for this class of business. I/We authorise Parksure, a trading Style of Cass-Stephens Insurances to handle the claim of behalf of the Insurers.

Claims and Underwriting Exchange
 Insurers pass information to the Claims and Underwriting Exchange Register run by Insurance Database Services Ltd (IDS Ltd). The aim is to help us to check information provided and also to prevent fraudulent claims. When we deal with your request for insurance, we may search the register. When you tell us about an incident (such as a fire, water damage or theft) which may or may not give rise to a claim, we will pass information relating to it to the register. You can ask us for more information about this. You should show this notice to anyone who has an interest in property insured under the policy.

Date: _____ Signature: _____