

BRITISH CARIBBEAN INSURANCE COMPANY LIMITED

36 Duke Street, Kingston
Jamaica W. I.
Tele: (876) 922-1260-5 Fax: (876) 922-4475

CLAIM UNDER POLICY No.....

Name of Insured:

Address:.....

Phone # (H).....(W)(C).....

Mortgagee.....

Address of Loss:

Date of Loss.....Time of Loss.....

1. How did the loss occur and what was the probable cause?
.....
.....
.....
.....
.....
.....

2. Is the property also insured with another Company?
If yes, please state the name of the Company, type of cover and Policy No.:
.....
.....

3. Is estimate attached – Yes No

NB. Estimate to be obtained as soon as possible.

LIST OF PROPERTY DESTROYED/DAMAGED			
Description of Property Destroyed or Damaged	Amount Insured \$	Amount Claimed \$	Comment

4. How will the damaged items be repaired?
.....

5. By whom?.....

6. Has damage occurred to third parties? Property Damage Bodily Injury

I declare the above information to be true and correct.