

CLAIM FORM

THE ISSUE BY	THE COMPANY O	F THIS FORM IS NOT
TO BE TAKEN	AS AN ADMISSIO	N OF LIABILITY.

OFFICE USE ONLY
CLAIM No.:
ESTIMATE:

ALL QUESTIONS ON THIS DECLARATION ARE TO BE ANSWERED

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Name of Insured in full		Date of Birth
Private Address		
Business Address		
Are you registered for GST? Yes □ No □ ABN Number:		
To what extent are you entitled to claim an Input Tax Credit on your in	surance premiums?	%
Postcode Telephone No		Mobile No
Policy No Expiry Date	AYF Gold Card N	0
Description of insured boat: Hull: Make	Boat Name	
Model	Reg No	
Motor		
Trailer Reg No		
1. When did loss/incident occur? Date		
2. Where did loss/incident occur?		
3a. For what purpose was the boat being used?		
b. If racing (I) Was race a club event? ☐ Yes ☐ No		
(II) Was race a major named race? ☐ Yes ☐ No Det		
(III) How long was the race?		
(IV) Was a protest lodged? ☐ Yes ☐ No Details		
4. Were there any witnesses to the loss/incident? \square Yes \square No Det	ails	
5. Person in control of the boat at time of loss/incident		Age
Boat Licence number		
6. Have you, or the person in control of the boat, made a claim of any		
	,	
7. Have you been refused insurance in the last 5 years? ☐ Yes ☐ No.) Details	
,		
8. Have you been convicted of any offence in the last 5 years? ☐ Yes	☐ No Details	
9. How many people (other than the driver) were in the boat at the ti	ime of the loss/incident?	
10. Give a detailed description of how loss/incident occurred and dama	age sustained, property sto	olen or missing (please include photos if available).
<u> </u>		

11.	. If the property was lost/stolen, has it been reported to the Polic	ee? 🗆 Yes 🗆 No Date	Time	
	Police Station	Police Officer		
	File Number (attach a copy of report)			
12.	Did you report the loss/incident to any Maritime Authority?	☐ Yes ☐ No Date		
	Is the boat financially encumbered? ☐ Yes ☐ No Details _			
	Is there any other insurance on the property under the claim			
	respectively.			
15.	Where can the damaged property be inspected?			
231				
	Estimated cost of repairs (attach quote)			
16.	If claim includes a claim for Personal Injury or Property Damag	ge to a THIRD PARTY, the follo	wing details are required:	
a)				
b)	Owner of other vessel			
	Address			
c)	Details of other vessel: Make of hull			
- /	Name of insurance company	_		
d)	Name and addresses of any hospitals, etc., or doctors who treate			
α,	Transcription of any reoption, etc., or decess will be elected			
e)	Was the scene of the incident attended by Police or other perso	ons of authority? \[\subseteq \text{Yes} \text{No} \]	Details	
٠,	mat the section of the including attended by Tonice of other power			
f)	Were there any independent witnesses to the incident? ☐ Yes	s □ No. Provide names and ad	dresses	
1)	were there any matpendent withesses to the mederic.	Tiovide names and ad		
17a	a. If claim is for damage to Insured's property arising out of a moto	or vehicle accident, the followin	g details of the vehicle towing	
	Insured's property are required.			
a)	Make of vehicle and year	Reg No		
1	If vehicle insured, name of insurance company	Policy No		
c)	Driver of vehicle at time of accident	· ·		
C)	Address			
17h	b. Details of other vehicle involved in accident:		rostcode	
a)				
а) b)	Name and address of ownerName of driver			
D)	Make of Vehicle and Year			
- 1				
c)	If vehicle insured, name of insurance company			
d)	Policy No.	Expiry Date		
D.	4.0)			
Dia	agram of Circumstances			

IMPORTANT INFORMATION PLEASE READ CAREFULLY & SIGN

Disputes are not an everyday occurrence at Club Marine. However we do provide an internal dispute resolution process should any dispute arise. You need only to ask for details. If you are not satisfied with the outcome of this process, we will advise you how to contact the insurance industry's external independent complaints scheme.

The Privacy Act 1988 requires us to tell you that in connection with this claim we collect your personal and sensitive information in order to:

- Calculate your loss and entitlements;
- Determine Allianz Australia Insurance Limited's liability;
- · Compile data; and
- Handle claims.

When handling claims, we may have to disclose your personal and other information to Allianz Australia Insurance Limited, third parties such as other insurers, loss adjusters, external claim data collectors, investigators, agents, to the Insurance Reference Service (IRS), or other parties as required by law.

You have the right to seek access to your personal information and to correct it at any time. Please contact your nearest Club Marine Office, EST 9am-5pm, Mon-Fri and advise us of any changes.

Should you wish to obtain more information about Club Marine privacy policies, please contact us and ask for a copy of our booklet called '*Privacy*'. From time to time we may advise or offer you information on other Club Marine products or services that may be relevant and of interest to you. If you do not wish to receive these offers or information please call your nearest Club Marine Office.

DECLARATION

- I hereby solemnly declare that the information above and on the face hereof is a true and faithful account of the event sustained by me and that I have not concealed anything which may be relevant to your consideration of this claim.
- I/We acknowledge that I/we have read and understood the *Privacy Act 1988* information referred to above and consent to the collection, storage, use and disclosure on my/our personal and sensitive information of all persons affected by this claim. I acknowledge that if I/we do not agree to the collection of my/our personal and sensitive information then Club Marine will be unable to process my/our claim.

DECLARED at	Date	
Before me	Justice of Practising Commissioner the Peace / Solicitor / of Declarations	Insured's signature

NOTES	
	C L U B M A R I N E
	MARINE

OFFICES - Club Marine Limited AFS Licence No 236916 ABN 12 007 588 347

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 □ New South Wales 191 New South Head Road, Edgecliff 2027. Tel: (02) 9087 1900 Fax: (02) 9363 2013
- ☐ Queensland 11 Cambridge Parade, Manly 4179. Tel: (07) 3348 1818 Fax: (07) 3348 1819
- □ South Australia Level 1, 100 Pirie Street, Adelaide 5000. Tel: (08) 8394 8244 Fax: (08) 8394 8240
- ☐ **Western Australia** 109 Marine Terrace, Fremantle 6160. Tel: (08) 9335 2222 Fax: (08) 9335 2266

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