



CIC GENERAL INSURANCE  
We keep our word

# Claim Form For Property Loss or Damage

CIC GENERAL INSURANCE LIMITED

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M-Pesa Business No. 600112

AGENCY / BROKER

**APPLICABLE TO:**

Fire, Domestic Package, Burglary, All Risks, Money, Glass and Goods in transit.

*The issue of this form is not an admission of liability on the part of the Company. All questions on this form must be answered in full.*

**INSURED DETAILS**

NAME:

SURNAME

OTHER NAMES

POSTAL ADDRESS:  CODE:  TOWN:

OCCUPATION:  AGE:

EMAIL:  MOBILE:

FINANCER DETAILS (if any)

**CIRCUMSTANCES**

1. Date of loss?  Time: AM:  PM:

2. Where did the loss or damage occur:

3. Describe fully how loss or damage occurred:

4. Is the premises fitted with an alarm?   If yes, was it activated?

If not, explain:

5. Is the premises guarded?   If yes, name of security firm:

6. Were the premises occupied?   If not, when were they last occupied?

7. Are you the owner of the premises?   If not, are you responsible for repairs?

8. Are there people implicated in the loss?    
If yes, give details:

9. Is there any other insurance in force providing cover for this loss?    
If yes, give particulars including insurer's name:

10. Have you ever suffered similar loss or damage?    
If yes, give particulars including insurer involved:

11. Were police notified?

12. If yes, attach the Police abstract report:

13. What steps have you taken to recover the lost property?

