

Claim Report

Report of Loss and/or Damage Marine Transit (HHG) Household Goods

	Claim No							
Name of Insured:	Phone: []							
Present Address:	City: State:							
Moved From:	Date of Pick up: / /							
Moved To:	Date of Delivery: /							
Name of Carrier (Name of Vessel):								
If goods in storage, state name and address of warehouse:								
Describe how the loss or damage occurred:								
My total claim accounted for as above is:								
State value of all goods declared for insurance:	\$							
Declaration								
I hereby undertake and agree, if any goods mentioned in this claim are subsequently recovered, in respect of which								
compensation has been received by me, to notify the company immediately and to return the goods to them or refund the amount received by way of compensation in respect of each article recovered.								
I hereby declare that the foregoing particulars and particulars appearing in the schedule are a true and faithful account of the								
loss sustained by me and that I have in no manner caused the said loss or by any fraud or misrepresentation sought unjustly to benefit thereby and make this solemn declaration conscientiously believing the same to be true.								
Taken and declared at	this							
day of	20							
Signature	Before me							
	Witness							

Claim Form



Privacy Notice

AIG collects personal information from you, your agents and people involved in this claim to assist in investigating or processing the claim, and maintain and improve customer service. This may include third parties claiming under the policy, witnesses and medical practitioners. Failure to disclose information required may result in AIG not being able to administer or declining the claim.

AIG may disclose your information to:

- AIG related entities, reinsurers, contractors or third party providers providing services related to the administration of the claim;
- assessors, third party administrators, emergency providers, retailers, medical providers or travel carriers, or any third parties
 or insurer from whom AIG seeks recovery related to the claim; and
- · government, law enforcement, dispute resolution, statutory or regulatory bodies, or as required by law.

Some of these entities may be located overseas, including in United States of America, United Kingdom, Singapore, Malaysia, the Philippines, India, Hong Kong, New Zealand as well as a country in which you have a claim and such other countries as may be notified in our Privacy Policy from time to time.

Our Privacy Policy is available at www.aig.com.au or by contacting us on 1300 030 886 and contains information about how you may access and correct your personal information, how to complain about a breach of the applicable privacy principles and how AIG will deal with such a complaint.

Consent

I consent to AIG collecting, using and disclosing personal information as set out in this notice. If I have provided or will provide information to AIG about any other individuals, I confirm that I am authorised to disclose his or her personal information to AIG and also to give this consent on both my and their behalf.

Signed			Date	/ /				
Details of Claim								
	Article Damaged	Described Nature and Extent of Damage or loss		Date Purchased	Original Cost	Declared Value/ Amount Claimed		
					Total:	\$		

PLEASE KEEP A PHOTOCOPY OF ALL DOCUMENTATION YOU SEND TO US FOR YOUR OWN RECORD



Bring on tomorrow

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