



About this form

Use this form to claim under your Landlord Insurance policy. The form must be completed by the policyholder.

Please print clearly using BLOCK LETTERS. If there is not enough room to answer a question, please use a separate sheet of paper and attach it.

If you have any questions about this form, contact us on: 1300 656 345.

Privacy Statement

Why we collect your personal information

We collect personal information, including sensitive information from you to assess your claim and, if your claim is accepted, for administration of the claim. We may also use your information to comply with legislative or regulatory requirements in any jurisdiction, prevent fraud, crime or other activity that may cause harm in relation to our products or services, and help us run our business.

If you do not provide all the information we request, we may not be able to assess or administer your claim.

Disclosing your personal information

We may disclose your personal information to other members of the Westpac Group, anyone we engage to do something on our behalf such as a service provider, and other organisations that assist us with our business. We may also disclose your personal information to other third parties including:

• your financial institution;

1

2

Iss BS/

- other insurers an d reinsurers;
- insurance claims reference services;
- claims assessors and investigators;
- an external dispute resolution body; and
- any Federal, State or Territory Police Department, or private organisation which investigates fraud.

We may disclose your personal information to an entity which is located outside Australia. Details of the countries where the overseas recipients are likely to be located are in the BankSA Privacy Policy.

As a provider of financial services, we have obligations to disclose some personal information to government agencies and regulators in Australia, and in some cases offshore. We are not able to ensure that foreign government agencies or regulators will comply with Australian privacy laws, although they may have their own privacy laws. By using our products or services, you consent to these disclosures.

Other important information

We are required or authorised to collect personal information from you by certain laws. Details of these laws are in the BankSA Privacy Policy. The Bank SA Privacy Policy is available at banksa.com.au or by calling 13 13 76. It covers:

- how you can access the personal information we hold about you and ask for it to be corrected;
- how you may make a complaint about a breach of the Privacy Act 1988 (Cth), or a registered privacy code, and how we will deal with your complaint; and
- how we collect, hold, use and disclose your personal information in more detail.

The BankSA Privacy Policy will be updated from time to time.

Where you have provided information about another individual, such as any other person named in this claim form, you must make them aware of that fact and the contents of this privacy statement.

Definitions

"We", "our", "us" means Westpac General Insurance Limited (the Insurer). "Westpac Group" mean Westpac Banking Corporation and its related bodies corporate.

Policyholder's details Policy number		3	What is the add	lress of the rented pro	operty?
Policyholder name(s)	HOM				
					Postcode
Postal address		4		aging agent's details	
			Cor	mpany name	
	Postcode				
Policyholder 1 Date of birth –	Policyholder 2 Date of birth – / /		Pos	stal address	
Home contact number	Home contact number				Postcode
()	()		Cor	ntact name	Office phone number
Work contact number	Work contact number				
()	()		Mot	bile phone number	Fax number
Mobile contact number	Mobile contact number				()
insurance registered for GST No Yes Are they entitled to premium paid? No	 Lity that paid the premium for this claim input tax credits on the ercentage are they entitled to? 	5	Are you claimir • loss or dama • loss or dama	e of bank, finance co ng for: age resulting from ma age to fittings, fixed ca	licious acts or theft, and/or
	%		No 🔂 Go Yes 💽 Ple	to 13 ease attach all inspect	group or community title? tion reports completed
d by: Westpac General Insurance L 3217 (08/15)	imited ABN 99 003 719 319		dur	ing the tenancy.	Page 1 of 4

7		damage been reported to th	he police? 15	5 When has the rent been paid up to? Rent amount per week
	No Yes Date	e reported Report nun	nber	/ / \$
			16	Has the new tenant moved into the property?
8	No	hen the loss or damage occ	curred?	No Yes When? Please attach a copy of the new tenancy agreement
		/ / a	ım/pm 17	Reason(s) for loss of rent?
9	When was the lo	oss or damage discovered?	?	tenant did not pay rent owing
	/ /	am/pm		tenant vacated property without notice tenant was evicted
10	Who do you bel	ieve caused the loss or dar	mage?	tenant was evided tenant was denied access to the property
			18	B Has the lease expired
11	Were there any	witnesses?		No Please attach a copy of the lease
	Yes 🕞 Wha	at are the witnesses' names	and addresses? 19	Have you received a notice to vacate from the tenant? No
				Yes Please attach a copy of the notice (if in writing)
			20	
				Yes Please attach a copy of the notice
12	Description of p happened	roperty damaged or stolen,		I Is the bond being held?
	Item	What happened to the item?	Cost to repair or replace	Yes How much
	1		\$	\$
			22	
	2		\$	the bond)? No D Go to 24
				Yes Please attach a copy of the application and copies of invoices for the replacement/repair you are
	3		\$	deducting.
			- 23	
	4		\$	\$
			24	Have you lodged a claim with the Residential Tenancy Tribunal to claim outstanding monies owed?
	5		\$	No Yes Please attach a copy of the claim
		tach copies of evidence of ts, invoices, quotes)	purchase, or cost to 29	5 Has a claim for legal liability been made against you? No
13	Has the tenant r	moved out of the property?		Yes Name and address of the person injured, or where another property is involved, the name of that property's owner.
	Yes When	n? / /		
14	Are you claiming	g for loss of rent?		
	No 🚺 Go to			
	Yes Perio	od of loss		
		/ / to /	/	
				Note : Please attach copies of correspondence (eg letters of demand, legal documents)

26		Id other insurance under which a claim for this loss, r legal liability can be made?				
	No					
	Yes	Insurance company Policy number				
27	Have you five years?	made a claim under an insurance policy in the last				
	No 🗌					
	Yes	Complete details below				
		Insurance company				
		Policy number				
		Date / /				
		What was claimed?				
28	Have you	ever had a building and contents claim refused?				
	No					
	Yes	Complete details below				
		Insurance company				
		Policy number				
		Date / /				
29		or a member of your family had insurance refused, or renewal not offered?				
	Yes 📄	Complete details below				
		Insurance company				
		Policy number				
		Date / /				
30		or a member of your family been convicted of a crimina the last five years?				
	No					
	Yes	Complete details below				
		Type of offence				
		Date of offence / /				

31 Declaration

I declare that all information I have given is true and correct. I understand that until this information is considered by the Insurer, my claim has not been admitted. I will continue to assist the Insurer in any way to reach a decision to accept or decline this claim.

I have read, understand and agree to the Privacy – Acknowledgements and Consents.

Signature	of	Insured	Person	1

	Date	/	/	
Name (please print)				
Signature of Insured Person 2				
	Date	/	1	
Name (please print)				

Attach supporting documents

Some questions in this form request you to attach copies of certain documents, where applicable, to support your claim. All of the documents are listed here. You can use this list to double-check that you have all the documents required. The number of the question that relates to each document is shown.

Document	See question
 All inspection reports completed during the tenancy including entry and existing condition reports and all periodic inspections reports 	
Evidence of purchase of items or cost to repair (e.g., receipts, invoices, quotes)	12
Copy of the new tenancy agreement for the new tenants	16
Lease agreement	18
Notice to vacate <i>received from</i> the tenant (if in writing)	19
• Notice to vacate issued to the tenant	20
Application for a refund of the bond	
 Invoices showing the value of replacement/ repair that you are deducting from the bond 	22
Copy of any relevant claim with the Residential Tenancy Tribunal	24
Legal liability correspondence	25

If you do not have all supporting documents

If you do not have all of the documents but can get them later, send the claim form now and forward the documents as soon as possible. If you think you will be unable to get a document at all, call us on **1300 656 345** before you lodge your claim.

Please keep a copy of this page for future reference

How to make a claim

- Advise the police immediately if the loss or damage was caused by burglary, home invasion, theft, vandalism or malicious damage.
- Complete this claim form.
- Attach all documents to support your claim. (See page 3 for details.)
- Send the completed form and supporting documents to:

Fax: 1300 200 850 Mail: General Insurance Home and Contents Claims GPO Box 4451, Sydney NSW 2001

While your claim is being processed

While we process your claim, ensure you keep any damaged items so that we can inspect them if required. During this time, we may also need you to supply further information.

What to do if you have a complaint

We're constantly striving to provide our customers with the best possible service, and we'll do our best to resolve any complaint you have quickly and fairly.

So if you do have a complaint about your policy, our service, the way the policy was sold to you, or the way your claim is being handled, here's what you should do.

Step 1

We ask that you first contact one of our Consultants to discuss your complaint.

For claims issues:

Phone 1300 369 989 Fax 1300 786 606

For any other issues: Phone 1300 369 989 Fax 1300 786 525

If the Consultant is unable to resolve the matter, they'll refer it to a Senior Officer, their Team Leader or Manager. The Senior Officer, Team Leader or Manager will acknowledge your complaint within 2 business days, providing their name and relevant contact details and keep you informed of the progress of your complaint at least every 10 business days.

The Senior Officer, Team Leader or Manager will try to resolve your complaint within 15 business days however, if we consider that further information, assessment or investigation of the complaint is required, we will agree reasonable alternative timeframes with you. If an agreement cannot be reached, we will notify you of your right to take your complaint to the next stage.

The Senior Officer, Team Leader or Manager will respond to your complaint in writing.

Step 2

If you're still not satisfied with the outcome, you may ask for us to refer the dispute to our Internal Dispute Resolution Officer who will review the matter.

Claims assessors

When we are notified of your claim, we will decide if a claims assessor is required to make an inspection of the loss or damage. If so, we will decide the same day we receive notification of your claim. The claims assessor will contact you within 24 hours and arrange to call on you at a convenient time.

Before the claims assessor arrives, please ensure that you have all of the relevant information available to support your claim, e.g., original invoices or the police report number. The claims assessor will ensure that the Insurer is given all the information required to process your claim as quickly as possible.

If a claims assessor is not required, we will process your claim and if any additional information is required, we will contact you, usually by phone.

If you have any questions

If you have any queries or need information in relation to your claim, please contact us on **1300 656 345**.

The Internal Dispute Resolution Officer's contact details are:

Internal Dispute Resolution Officer Westpac General Insurance Limited Mail GPO Box 4451, Sydney NSW 2001 Phone 1300 369 989 Fax 1300 786 606 for claims issues or 1300 786 525 for any other issues

The Internal Dispute Resolution Officer will acknowledge your complaint, providing their name and relevant contact details and keep you informed of the progress of your dispute at least every 10 business days.

The Internal Dispute Resolution Officer will try to resolve your dispute within 15 business days however, if we consider that further information, assessment or investigation of the dispute is required, we will agree reasonable alternative timeframes with you. If an agreement cannot be reached, we will notify you of your right to take your dispute to the Financial Ombudsman Service (FOS).

The Internal Dispute Resolution Officer will respond to your dispute in writing.

Step 3

If you are not satisfied with the decision made or we cannot otherwise reach an agreement, you can refer your matter to FOS which provides a free independent dispute resolution service for consumers who have a general insurance dispute.

Additionally, if we are unable to resolve your complaint or dispute to your satisfaction within 45 calendar days, we will inform you of the reasons for the delay and that you may take your complaint or dispute to FOS. The contact details are:

Financial Ombudsman Service

Mail GPO Box Melbourne VIC 3001 Phone 1300 780 808 Fax (03) 9613 6399 Email info@fos.org.au

First things first.

Please note that if you haven't first tried to resolve your complaint with us, the Financial Ombudsman will direct your complaint to us and we'll provide you with a response under our Internal Dispute Resolution process.