



**TenantCover**

# TenantCover Claim Form

## When to use this claim form

This claim form should only be used if you are a tenant in a residential rental property and hold a current tenant contents policy with EBM Insurance Brokers.

## Our Commitment to You

We are totally committed to providing a fair and prompt claim settlement service to you. As soon as we have the completed information before us, we will issue a Claims Advice to you within a matter of days and then arrange for the dispatch of the Insurer's claim cheque **within 5 working days in most cases.**

Should you have a complaint about our service or claim settlement procedures, please notify us so that we can immediately address your concerns. In the first instance your complaint should be faxed to Sharon Fox-Slater (Claims Manager) on 1300 794 773 or emailed to [sharonfs@ebminsurance.com.au](mailto:sharonfs@ebminsurance.com.au)

**Thank you for taking the time to complete this form in detail. Please mail the original claim form and attachments to:**

**EBM Insurance Brokers**  
Claims Department  
4/651 Victoria Street  
ABBOTSFORD VIC 3067

**If you have any queries please contact our national claims centre on  
1800 661 662 or [claims@rentcover.com.au](mailto:claims@rentcover.com.au)**

**IMPORTANT**

All sections must be completed to avoid delay.

**Section 1 - Policy and Contact Details**

**Policy Details**

Insured Property Address: .....

Insured Name: .....

Is the Insured a Business or Company? Yes  No  **If No go to Contact Details**

Business/Company Name: .....

ABN: .....

Is the Insured registered for Good and Services Tax? Yes  No

Entitled/intend to claim an input tax credit on the GST component of the premium applicable to Policy:

Will you be claiming an amount less than 100% Yes  No

If yes specify amount claimed \_\_\_\_\_ %

Entitled to claim an input tax credit for repairs or replacement of the item that has been lost or damaged:

Will you be claiming an amount less than 100% Yes  No

If yes specify amount claimed \_\_\_\_\_ %

**Contact Details**

Name of person submitting claim: .....

E-mail address: .....

Telephone: .....

Facsimile: .....

Managing Agent Name (if applicable): .....

Please advise the payee name to be shown on the cheque payment:.....

Please advise the address where correspondence and the claim payment cheque should be sent: .....

.....

.....

**What MUST be attached - Please Tick to Confirm Attachment**

- Inventory List
- Two quotes for loss or damage if exceeding \$500 (these must include a full break-up of costs)
- Original Tax Invoices for damage repairs (i.e. emergency repairs)
- Photos of Damage
- Proof of Ownership (i.e. manuals, receipts, valuations, photos etc)
- Copy of Police Report or Event Number (i.e. theft)

If any items are missing provide the reason and state when you believe they will be available:

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.....



**BEFORE SIGNING BELOW**

**Have you completed ALL SECTIONS of the claim form?  
We are unable to process claims where the claim form is incomplete**

**Declaration**

I/we do hereby declare that to the best of my/our knowledge the foregoing answers are true and correct and I/we have in no manner caused the said loss or by any fraud or wilful misrepresentation sought unjustly to benefit by the said event and that the information detailed in the claim form above is a true and faithful account of the actual loss sustained excluding any profit or advantage.

No information likely to affect this claim has been withheld.

And I/we hereby undertake and agree to notify EBM immediately if any of the property mentioned in this claim is subsequently recovered, and at the option of EBM to return the property or to refund the amount of money received by way of compensation in respect thereof.

SIGNATURE:..... Date:.....

SIGNED BY (print clearly): .....



**TenantCover**

In dealing with or settling this claim we will be acting under an authority given to us by the Insurers QBE Insurance (Australia) Limited and therefore we will be dealing with or settling this matter as Agents of QBE and not as your agent.