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Co. Reg. No. 197100152R

CLAIM FORM - GENERAL

This form is issued without prejudice to any of the stipulations or conditions of the Company's Policy, and is not to be taken as an admission of liability on the part of the Company.

IT IS		ENTIAL 1	be completed and returned within SE	. , .	• •	
PARTICULARS OF Insured's : Name		LARS OF	<u>INSURED</u>	Policy Number	:	
Add	ress	:		Contact Number	:	
			Singapore	Email	:	
	1					
1.	(a)	State will damage	hether the property was stolen, lost or d.			
	(b)		n, do your suspicions rest on anyone, o, whom?			
	(c) When and where was the property last seen by you?					
2.	(a)	Date and	d time of Loss/ Damage / Occurrence			
	(b)	Place of	Loss/ Damage / Occurrence			
3.		State full circumstances of Loss/ Damage / Occurrence				
4.	Was a police report made?					
	(a) (b)		lease attach a copy of the police report. ease state the reason.			
5.			ole owner of the property? ne and address of owner.			



6.	property? If yes, please state i	insurances covering t name and address of surance and policy nu				
7.	mentioned, give the	pect of any article not number of the policy the property to which				
8.	Was the premise oc	cupied at the time of				
9.	of or damage	viously sustained any to property? n made upon any (
	Underwriters? If so, give name, da paid in the chart bel	te, nature of loss and				
Particulars of Claim Full description of article(s) lost, stolen or damaged.		Date purchased	Purchase price	Deduction for age, use or wear and tear	Amount claimed	Remarks
n acc hall ww.	form part of the term uoi.com.sg			on Act 2012 ("PDPA"), t copy of UOI's Privacy		
We				e and correct to the be ower in dealing with the		wledge and

Date