



**POLICE REPORT**

Station name

Reference number  Date reported

**OTHER INTEREST/INSURANCE**

Has any other party an interest in the insured property, e.g. Hire Purchase or other Credit Agreement? YES  NO

If "YES", please provide.

Name  Interest  %

Is there any other insurance covering this Loss/Damage? YES  NO

If insured, provide name of insurer

**VALUE OF ALL PROPERTY INSURED**

Estimated total value of all property insured under the policy P

When last valued?

**DECLARATION BY INSURED PERSON**

I/We solemnly declare that I/We have suffered loss of or damage to the property enumerated on the reverse hereof and that the said property was in my/our possession immediately prior to the said loss/damage which occurred in the circumstances described above.

Signature of Insured Person

Capacity

Date

PLEASE COMPLETE STATEMENT

STATEMENT OF PROPERTY LOST, STOLEN OR DAMAGED						
N.B. Claims in respect of damage to buildings must be accompanied by a builder's estimate.						
Number	Description	Date acquired	From whom purchased or acquired	Current replacement value	Deduction for wear and tear or depreciation (if applicable) or value of salvage	Amount claimed