

Tower Household or Commercial Property Claim Form

To help us handle Tower Household or Commercial Property claims please provide us with the below information. Claims can only be submitted by a named Policyholder or a broker / authorised representative. If you wish to register a claim on behalf of a Policyholder we will require their written consent. Please complete all sections of this form. Note that this is does not form part of Tower's Express Claims Service.

Policyholder Name:					
Policy Number:			Date of Loss:		
Circumstances of Loss / How Damage Occurred:					
Location of Loss / Damage:					
What does your Claim relate to?	Buildings	Contents	Personal Pos	sessions	Other
Description of Damage & Areas of Damage:					
Is the policyholder responsible for lease (or other similar contractual	arrangement)?			Yes	No
Written estimate for repairs / repl (estimate is required before claim				Yes	No
Do you have any supporting docur items worth in excess of £250?	nentation for owne	ership and / or value of	f lost / Damaged	Yes	No
Third Party Details (if applicable):					
Crime reference number: (Required for all loss or theft claims)					
Is the policyholder VAT registe	red:			Yes	No
Email Address:					
Telephone Number:				Date:	
Preferred method of communication: Email Post					
Name of Bank:			Account I	Number:	
Bank Account Name: NB: This should be policyholder account, if paying anyone else a signed mandate is required.			So	rt Code:	

To notify the claim, please email this form to your Broker

If you are a direct customer of Tower, please email the form to: <u>tower.insurance@uk.rsagroup.com</u> or alternatively call 01624 645900

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