Public and Products Liability
Claim Form

Personal and Policy Details

1.1.	Full Name of Insured:	
1.2.	Policy Number:	

1.3. Please provide your contact information and a few other general details about your business:

Contact Name:

Email: | Phone:

Mobile: | Fax:

Website:

1.4.	Profession / Occupation:	
1.5.	Address:	
1.6.	ABN:	

1.7.1.	Are you registered for GST?	Yes, Go to 1.7.2.	No, Go to 1.8.1.
1.7.2.	To what extent are you entitled to claim an Input Tax Credit on the GST applicable to the premium?		%
1.7.3.	To what extent are you entitled to claim an Input Tax Credit on the GST applicable to the claim?		%
1.8.1.	Other Interested Party:		
1.8.2.	How Interested:		

Other Insurance

1.9.1.	Is there any other insurance in force which would cover this in whole or in part?	Yes, Go to 1.9.2.	No, Go to 2.1.
1.9.2.	Insurer's Name:		
1.9.3.	Policy Details:		

1800 096 829
info@hsua.com.au
hsua.com.au

A.C.N 096 939 169 AFS License 244370
PO Box 7174, Brendale, QLD, 4500
1/3 Hinkler Court, Brendale

Details of Loss, Damage or Occurrence

| 2.1. | Date of Incident: | | 2.2. | Time of Day: | |

| 2.3. | Incident Address: | |

| 2.4. | Please tell us about the incident: |

2.5. Please provide details on the injured person/s or owner of damaged property:

name	address	phone	value
			$
			$
			$
			$
			$

2.6.1. Is the injured person or owner of damaged property in your employment, in the employ of any contractor or sub-contractor to you, or related to you?

Yes, Go to 2.6.2. No, Skip to 2.7.1.

2.6.2. If **"Yes"** to 2.6.1., please provide full details:

2.7.1. Has any claim been made against you?

Yes, Go to 2.7.2. No, Skip to 2.8.1.

2.7.2. If **"Yes"** to 2.7.1., please provide full details and attach all communication received:

2.8.1. Did you admit liability in any way?

Yes, Go to 2.8.2. No, Skip to 2.9.1.

2.8.2. If **"Yes"** to 2.8.1., please provide details:

1800 096 829
info@hsua.com.au
hsua.com.au

A.C.N 096 939 169 AFS License 244370
PO Box 7174, Brendale, QLD, 4500
1/3 Hinkler Court, Brendale

Responsible Party

2.9.1.	In you opinion, was any other person/s responsible for the loss, damage or cause of the occurrence?	Yes, Go to 2.9.2.	No, Skip to 2.10.1.
2.9.2.	Full Name:		
2.9.3.	Address:		
2.9.4.	Phone:	2.9.5.	Mobile:

Incident Witnesses

2.10.1.	Were there any witnesses to the incident?	Yes, Go to 2.10.2.	No, Skip to 3.1.
2.10.2.	Witness Name:		
2.10.3.	Witness Address:		
2.10.4.	Witness Phone:	2.10.5.	Witness Mobile:

Claims History

3.1.1.	Have you ever previously sustained loss / damage or caused damage or injury to third parties?	Yes, Go to 3.1.2.	No, Skip to 4.1.

3.1.2. If **"Yes"** to 3.1.1., please provide details:

3.1.3.	Was an insurance company involved?	Yes, Go to 3.1.4.	No, Skip to 4.1.

3.1.4. If **"Yes"** to 3.1.3., please provide details including the company and year of claim:

EFT Authorisation

4.1. I hereby authorise and request that Proclaim on behalf of High Street Underwriting Agency to credit my bank account as indicated below:

Account Name:

Account Bank:

BSB (6-Digits):   Account Number:

Declaration

– I / We declare that to the best of our knowledge these particulars are truthful, accurate and complete.

Signed:

Full Name:

Position Held:

Date:

Privacy Declaration

High Street Underwriting Agency is committed to protecting your privacy in accordance with the Privacy Act 1998 (Cth) and the Australian Privacy Principles.

We use the information you provide to us to assist with your insurance needs. We provide your information to insurance underwriters and agents that provide insurance quotes offer insurance terms to you or the companies that deal with your insurance claim (such as loss assessors and claims administrators).

Your information may be given to various underwriters at Lloyd's if we are seeking insurance terms from them, or to reinsurers who are located overseas. You will be informed where those companies are located at the time any advice is given to you.

We also supply your information to the providers of our policy administration and broking systems that help us to deliver our products and services to you.

We do not trade, rent or sell your information.

If you don't provide us with complete information, we cannot properly seek insurance terms for you, or assist with claims and you could breach your duty of disclosure. You can check the personal information we hold about you at any time.

When we arrange insurance on your behalf, we only ask you for the information we need and we only use the information that we collect for the primary purpose(s) for which we collect it. These are:

- Issuing insurance policies;
- Handling claims under insurance policies;
- Providing information about insurance matters;
- Dealing with brokers, risk carriers and reinsurers; and
- Operating our business.

This can include a broad range of information ranging from your name, address, contact details, age to other information about your personal affairs including your financial situation, health and wellbeing.

Insurers may in turn pass on this information to their reinsurers. Some of these companies are located outside Australia. For example, if we seek insurance terms from an overseas insurer, your personal information may be disclosed to the insurer. If this is likely to happen, we inform you of where the insurer is located, if it is possible to do so.

When you make a claim under your policy, we assist you by collecting information about your claim. Sometimes we also need to collect information about you from others. We provide this information to your insurer (or anyone your insurer has appointed to assist it to consider your claim, e.g. loss adjusters, medical brokers etc.) to enable it to consider your claim. Again this information may be passed on to reinsurers.

For more information about how to access the personal information we hold about you and how to have the information corrected, and how to complain if you think we have breached the privacy laws, ask us for a copy of our Privacy Policy by telephone to our Privacy Officer on 1800 096 829 or visit our website www.hsua.com.au

1800 096 829
info@hsua.com.au
hsua.com.au

A.C.N 096 939 169 AFS License 244370
PO Box 7174, Brendale, QLD, 4500
1/3 Hinkler Court, Brendale