Great Eastern General Insurance (Malaysia) Berhad (102249-P) (Formerly known as Overseas Assurance Corporation (Malaysia) Berhad)
Level 18, Menara Great Eastern, 303, Jalan Ampang, 50450 Kuala Lumpur General Line: +603 4259 8888 Fax: +603 4813 0055
Customer Service Careline: 1300-1300 88

Website: www.greateasterngeneral.com



GENERAL CLAIM FORM

This form is issued without admission of liability. Any documentary evidence and/or other report required by the Corporation shall be furnished at the expense of the Insured.

Claire No.		Dallari Na	A					
Claim No. :		Policy No. :	Agency :					
1.	Insured's Name/Company							
2.	Address							
3.	Occupation/ Business							
4.	Date of Loss/Time/Day							
5.	Situation of Loss							
6.	Police Station to which Loss was reported		Report No. : Date :					
7.	Were the premises occupied at the time of the theft?							
8.	Please state fully to the best of your knowledge and belief the cause of the loss and damage and how did it occurred?							
9.	Have you any suspicious as to any parties implicated? If yes, please give particulars	□YES □NO						
10.	Are you the sole owner of the property lost or damaged? If no, give name of owner	□YES □NO						
11.	Is the property in respect of which you are making a claim Insured with any other Insurer against all or any of the risk covered by the above Policy? If yes, please give particulars	□YES □NO						
12.	Have you ever made a claim on any Insurer in respect of loss or damage by any of the risk covered by the above Policy? If yes, please give particulars	□YES □NO						
The undersigned Insured hereby declared to have answered the above questions conscientiously and truthfully.								
Date	:		Signature of Insured Company's chop (if applicable) Name : Designation: NRIC :					

Tick (/) where applicable

STATEMENT OF CLAIM

The nature of the loss or damage should be stated, with full details, in the Remarks column

The amount to be claimed on any articles is limited to the actual value at the time of loss (for Plate Glass claim only)

Full Description of Property Lost or Damaged	Name and Address of Party from whom Article Purchased or by whom Presented	Date of Purchase or Presentation as far as known	Price Paid as far as is known	Deduction for Age Use and Wear and Tear	Sum Claimed for Present Value or Damage	REMARKS Regarding Loss or Damage