



FIDELITY SHIELD
INSURANCE COMPANY LIMITED

HEAD OFFICE

Equatorial Fidelity Centre Waridi Lane
Westlands
P.O. Box 47435-00100 NAIROBI
Tel: 4225000
Fax: 4445699
Email: info@fidelityshield.com
Website: <http://www.fidelityshield.com>

MOMBASA BRANCH

Fidelity Shield House
Kaunda Street
P.O. Box 90103-80100, MOMBASA
Tel: 312651/2/3/4 Fax 221098
E-mail: mombasa@fidelityshield.com

ELDORET BRANCH

KVDA Plaza, 11th Floor
Oloo Street
P.O. Box 7877
Tel. 22393, Fax 63581
E-mail: eldoret@fidelityshield.com

KISUMU BRANCH

Kenya Re Plaza (Wedco Centre)
Shop Unit 2 Block B,
Oginga Odinga Street, Kisumu
Tel: 057-2021739, FAX: 057-2026421
Email: kisumu@fidelityshield.com

PROPERTY DAMAGE (MISC) CLAIM FORM

Applicable to Fire & Special Perils, Domestic Package, Burglary, All risks, Money, Baggage and Glass.

The issue of this form is not admission of liability on the part of the Company.

All questions on this form MUST be answered in full.

Policy No.	1. Renewal Date	Date of payment of premium:
Insured	2. Name..... 3. Address..... Telephone No..... 4. Business of Occupation..... 5. Email Address.....	
Circumstances Giving rise to Claim	5. Date and Time of Loss..... a.m..... pm..... 20..... 6. Where loss or damage occurred..... 7. Describe fully how loss or damage occurred.....	
General Information	8. Type of premises involved..... 9. Were the premises unoccupied? Yes/No. If so, when were they last occupied? 10. Are the premises self-contained? If not, name of other occupants..... 11. Are you the owner of premises? 12. Are you responsible for repair..... 13. Have you any suspicious as particulars implicated.....	

	<p>14. Is there any other insurance in force providing covers for this loss? If so give particulars including insurer's name, address and policy No.</p> <p>15. Have you suffered similar loss or damage? If so, give particulars and whether claim was on.....insurers.....</p> <p>16. At the time of the loss what was the value of</p> <p>a) The Buildings.....</p> <p>b) All the property in the premises.....</p>
<p>Complete in all Cases involving THEFT, MALICIOUS DAMAGE OR MISSING ARTICLE</p>	<p>17. When were Police notified?</p> <p>18. Address of Police Station.....</p> <p>19. What other steps have you taken to recover property lost or damaged.....</p> <p>20. Give full details of method of entry to premises.....</p> <p>21. If alarm fitted, did it function properly? If not, give reasons.....</p> <p>22. Are guards employed? If so, name of firm.....</p>
	<p>23. Starting point and destination of transit</p> <p>24. Who was accompanying property lost?</p> <p>25. If employee, state age and duties.....</p> <p>26. Are they insured under Fidelity Guarantee Policy? If so, Insurer's name, and Policy No.</p> <p>27. How often is this transit made?</p> <p>28. What is maximum ever carried any one time?</p>
<p>Amount Claimed</p>	<p>29. Kenya Shillings.....Please attach details.....</p>

I/We declare that I/We have not withheld any material information and that all statements made on this form are true to the best of my knowledge and belief that articles and property described below belong to me/us, and that no other person has any interest whether as Mortgages, Trustee or otherwise except as mentioned on the Policy.

Date _____ Signed _____

