



Claim Report

Please answer all questions as fully as possible, using the spaces provided as well as additional pages where required.

Name of insured	<input type="text"/>	Policy Number	<input type="text"/>
Name of Broker	<input type="text"/>		
Address of Insured Property	<input type="text"/>		
Contact details	<input type="text"/>		
Email details	<input type="text"/>		

Date of Loss, Theft or Damage: / /

Location of Loss, Theft or Damage (if different from Insured Property).

Please state fully the circumstances of the event which has given rise to this claim.
(If the event is a theft from the insured property, please provide details on how entry was gained.)

If claiming for loss or damage resulting from theft, the date the matter was reported to the police.
(Please attach a copy of the police report.)

Police File Number



Electronic Funds Transfer (EFT) details

1. Do you want the benefit to be deposited directly into a financial institution account via EFT? Yes No

2. Name the account is held in:

3. BSB number (6 digits in total) Financial institution account number (up to 9 digits only)

(If you are unsure of the BSB number, please contact the financial institution where the account is held.)

4. Financial Institution: Branch:

GST (Only applies if your policy was purchased for business purposes)

1. Have you claimed or do you intend to claim an Input Tax Credit (ITC) in respect of the GST paid on the insurance premium for this policy? Yes No

2. If YES, what percentage of the GST did you claim, or are you intending to claim? Insured ITC %



Privacy Notice

AIG collects personal information from you, your agents and people involved in this claim to assist in investigating or processing the claim, improve customer service and products and carry out research and analysis, including data analytics. This may include third parties claiming under the policy, witnesses and medical practitioners. Failure to disclose information required may result in AIG not being able to administer or declining the claim.

AIG may disclose your information to:

- your or our agents, AIG related entities, reinsurers, contractors or third party providers providing services related to the administration of the claim;
- assessors, third party administrators, emergency providers, retailers, medical providers or travel carriers, or any third parties or insurer from whom AIG seeks recovery related to the claim;
- entities to which AIG is related and third party providers for data analytics functions; and
- government, law enforcement, dispute resolution, statutory or regulatory bodies, or as required by law.

Some of these entities may be located overseas, including in United States of America, Canada, Bermuda, United Kingdom, Ireland, Belgium, The Netherlands, Germany, France, Singapore, Malaysia, the Philippines, India, Hong Kong, New Zealand as well as a country in which you have a claim and such other countries as may be notified in our Privacy Policy from time to time.

Our Privacy Policy is available at www.aig.com.au or by contacting us on 1300 030 886 and contains information about how you may access and correct your personal information, how to complain about a breach of the applicable privacy principles and how AIG will deal with such a complaint.

Consent

I consent to AIG collecting, using and disclosing personal information as set out in this notice. If I have provided or will provide information to AIG about any other individuals, I confirm that I am authorised to disclose his or her personal information to AIG and also to give this consent on both my and their behalf.

Name	<input type="text" value="Please Print"/>	Signature
Date	<input type="text" value="/ /"/>	

Telephone 1300 121 251

Please send to: consumersteadfastclaims@aig.com

Steadfast Claims
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Melbourne VIC 3001

SUBMIT FORM

PLEASE KEEP A PHOTOCOPY OF ALL DOCUMENTATION YOU SEND TO US FOR YOUR OWN RECORD



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