





## Theft Claim form

Full Name of Insured:		Day Phone No:		
Address:		Home Phone No:		
		Mobile Phone No:		
		Fax No.:		
		Email:		
Are you the owner of the insured vessel?	YES/NO	If NO please advise who is:		
Are you registered for VAT?	YES/NO	If YES status and VAT No:		
Type/Class of Vessel:				
Name of Vessel:		Total Value €		
Location/full address from which theft/loss	s occurred:			
Whether ashore or afloat?:				
Start date and time when theft was		Committed:		
		Discovered:		
By whom was it discovered? (Full name and	address):			
By whom was such discovery witnessed? (F	ull name and addr	ress):		
When was the vessel last attended or stole	n items last seens	8:		
Where were items stored?:				
How was entry gained to vessel or premises				
What locks or security precautions were us	ed?:			
If the stolen items were not on the vessel or	in secure premis	ses, please can you describe where they were located and why?:		
Was the vessel or stolen items in anyone's custody or control? If so give details:				
Are the items claimed for insured elsewhere	? If so please giv	e name and address of insurance company and policy number:		

e address and police statio	on where loss/theft was reported stating	date and crime reference num	ber.
t steps have been taken to	recover property (i.e. notice in yacht clu	b/marina, offer of reward, not	ice in local newspaper etc
it steps have you, or are yo	u taking to prevent a recurrence?:		
ere is no evidence of theft	, or forcible entry has a thorough search	peen made for the missing pro	perty?:
Full description of articles stolen	When and where purchased or, if a gift, the name and address of giver	Price paid	Sum claimed
	k, and damage repairs. (Continue on sepa		

## Please give below a full and concise report of this incident:

Statement

## Outboard motor

Make/Horsepower:	Sum claimed £	
Serial number of outboard:	Model number:	Year:
Advise make of lock by brand name and type:		
Tender Dinghy		
Make:	Description:	Sum claimed $\pounds$
Was she marked with the name of the parent vessel or	r identification numbers?:	
Declaration		
I/We declare that the whole of the statements of this claim are true in every respect and I/we a recover under this Policy shall be absolutely for	agree that if any false or untrue s	
I/We further declare that no other person has a mortgagee, trustee or otherwise, and that the sother office.		
Claimant's Signature:		
Occupation:		Date:

NB: 1. The amount to be claimed on any article is limited to the actual intrinsic value at the time of theft. 2. Receipts obtained at the time of purchase of articles should be attached wherever possible. 3. Please note that Haven Knox-Johnston are able to settle claims on behalf of MSIG Europe SE, under a delegated authority agreement. Any claim outside of our authority has to be agreed by your Insurer.

## Data Protection

Your information has been, or will be, collected or received by Haven Knox-Johnston. We manage personal data in accordance with the data protection law and data protection principles. We need personal data so that we can provide you with boat insurance that's shipshaped around you, and other services, and we'll collect the personal data necessary to do this. This may be personal information like your name, address, contact details, identification details, financial information and risk details. You can find the full Data Privacy Notice at https://www.havenki,com/privacy-notice/ or you can get a paper copy of the Data Privacy Notice by contacting us on 01732 223 600 or by writing to us at Horizon House, Eclipse Park, Sittingbourne Road, Maidstone, Kent, ME14 3EN. Our data protection compliance officer can be contacted at; Howden UK Brokers Limited, One Creechurch Place, London, United Kingdom, EC3A 5AF, or by email at compliance@howdeninsurance.co.uk

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