

CLIENT REQUEST & INFORMATION FORM

Claim Admin Solutions can assist you with your short-term insurance claim, obtain quotations and submit your claim to your short-term insurer and or broker on your behalf. We need the following information to proceed with your claim:

Yes, please handle my short-term insurance claim on my behalf and send me the necessary documents to proceed with the process.

Full names & surname of insurer	
Physical address ad Postal Code	
Telephone number	
Cellular number	
Fax number	
E-Mail address	
Nature of claim (short description)	
Estimated value of claim amount	
Name of Short-term insurer	
Policy number	
Complete list of missing/stolen/damaged items (Please mention serial numbers, make, model, fabricate, if possible)	Attached / Shall be submitted a.s.a.p.

Signed at _____ on this ____ day of _____ 20____.

Signature of Client

Important notes:

Please forward the completed form to us without delay so that we can expedite your claim.

We shall provide you with our Terms & Conditions for your perusal and signature on receipt of Client Request & Information Form.

We guarantee that we shall take out the hassle of the claim process by making the Claim Process Simple, Easy and fast.

From the Claim Admin Solutions - Team