

Residential Strata Insurance Claim Form

Please complete this form and email it to claims@hutchunderwriting.com.au

Alternatively, please complete our [online strata claim form](#) and submit it directly into our system for faster processing.

Policy Holder Details	Insured Name
	Contact Name
	Phone number(s)
	Email
	Address
Policy number	
HRS	
GST / ABN <i>If registered for GST, please provide your ABN and Input Tax Credit percentage.</i>	



The Clear Way to Better Cover

W: hutchunderwriting.com.au/claims T: [1300 256 056](tel:1300256056)

Hutch Underwriting Pty Ltd ABN 846 552 56 134, L8, 17 Bridge Street, Sydney, NSW, 2000.

Hutch is an Authorised Representative (number 001296345) of CoverRadar Group Pty Ltd, ABN 146 412 25 809, AFS Licence number 523647, of L8, 17 Bridge Street, Sydney, NSW 2000.

Broker Details

Broker email

Broker telephone number

Reported by

Contact Type

Choose from drop down menu:
broker; committee member; lot owner; tenant; strata manager; other

If other, please specify

Name

Phone number(s)

Email

Loss or Incident Details

Date and time of loss

Loss cause



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	List all affected units
	Description
	Amount claimed, if known <i>If applicable, breakdown of components of total amount.</i>
	Any third party responsible for loss or damage <i>If yes, provide details.</i>
Any demand or notice of claim received or anticipated from or on behalf of third parties <i>If yes, provide details.</i>	
Any actions take to mitigate (reduce) or recover loss <i>If so, provide details.</i>	



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Other Insurance

Any other insurance covering damage or loss
If yes, provide details.

Incident location

Address

Description (if applicable)

Police Details

Reported to Police?

If yes, provide police incident no, date reported, and station reported to.

Site Contact

Contact type

For access purposes. Choose from drop down menu:

committee member; lot owner; tenant; property manager; strata manager & other.

If other, please specify



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	Name
	Phone number(s)
	Email

Bank Account details	Account name <i>For any settlement / payment.</i>
	BSB Number
	Account Number

Attachments	Photos of damage
	Invoice or quote
	Repair or damage report
	Original purchase invoice
	Police report
	Any other relevant documents
	<i>Itemise your list of attachments.</i>



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Additional information

If you have any other information, or your information does not fit with the field space allocated please provide it here.



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