



**Sagicor General Insurance Inc.**

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**BURGLARY, HOUSEBREAKING,  
LARCENY AND THEFT – CLAIM FORM**

(PLEASE COMPLETE ALL DETAILS ON THIS PAGE / PLEASE WRITE IN BLOCK LETTERS AND TICK CORRECT ANSWER BOXES)

**STATEMENT OF AND PARTICULARS OF CLAIM**

**Policy No.:** ..... **Claim No.:** .....

**1. Name of Insured:** .....

**2. Address:** .....

.....

Telephone No.: ..... Business: .....

E-mail: ..... Vat/B.I.R. #: .....

**3. Location of occurrence:** .....

.....

**4. Date damage occurred:** ..... Time damage occurred: .....a.m . ..... p.m.

**5. Were premises occupied at time of loss?**  Yes  No

If not, when were they last occupied?

.....

**6. Did you make a report to the police?** .....

Date of Notification:.....

Police Station: .....

**7. Describe circumstances of loss:** .....

.....

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**8. Are you the sole owner of the property damaged or stolen?**  Yes  No

If not, state full particulars of any other interest:

.....

.....

**9. Do you have any other insurance against this loss?** .....

If so, give names and addresses of insurers:

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**10. State total value of contents:** .....

**11. Give details of any previous claims in connection with these or any other premises:**

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*Please turn over-leaf >>>*

