

CLAIM FORM PREMISES POLLUTION LIABILITY INSURANCE

Please note that the Insured shall, as a condition precedent to the Insurer's liability under the policy for Loss on account of a Claim, give to the Insurer such information and cooperation as the Insurer may reasonably require, including but not limited to the indicative information asked in this form. Each Insured agrees not to settle or offer to settle any Claim, incur any Defence Costs or Legal Representation Expenses or otherwise assume any contractual obligation or admit any liability with respect to any Claim without the Insurers' prior written consent. Please note that the intimation is without prejudice, and the insurer's rights are reserved.

Policy Number:

Policy Details

1	Type of Cover:	PREMISES POLLUTION LIABILITY INSURANCE
2	Policy period	
3	From	
4	To	
5	Retroactive Date	
6	Limit (sum Insured)	
7	Deductible	
8	Date of Occurrence of Circumstances leading to loss	

Are you or any of the proposed applicants/beneficial owner a PEP* or Family member/Close relatives/Associates of PEP*?

☐ Yes ☐ No

If yes, please give details (Nature of relationship and position held by PEP): _____

"Politically Exposed Persons" (PEPs) are individuals who have been entrusted with prominent public functions by a foreign country, including the heads of States / Government, senior politicians, senior government/judicial/military officers, senior executives of state-owned corporations and important political party officials;".

Claim Details

9	Description of the Claim	
10.	Jurisdiction affected	
11.	The nature of the alleged bodily Injury and/or property damage	
12.	The date it was committed,	
13.	The nature of the alleged damage,	
14.	The names of the claimants	
15.	Defendants	
16.	The manner in which the Insured first became aware of the Claim	

Authorised Signatory