LASACO House, Plot 16, Acme Road, Ogba, Ikeja
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Lasaco
Assurance Plc
Reg No. 31126

HOUSEHOLDERS CLAIM FORM

POLICY NO.....

Name of Insured.....

Tel No .....

AN ANSWER IS REQUESTED TO EACH OF THE FOLLOWING QUESTIONS

(a) What was the nature of the occurrence (e.g. "Fire") and when did it take place?

.....

(b) At what address did it take place? .....

.....

(c) For what purposes were the premises being use as at the date of occurrence

.....

(d) Describe briefly what happened and the resultant damage, and state what you believed caused it to happen .....

.....

.....

(e) Where the Premise and their occupants at the time of the occurrence exactly as described in the policy?.....

.....

.....

(f) Had any element of risk been introduced which was not allowed by the policy?.....

(g) Were there at the time of the occurrence any other existing Insurances on the said property? With any other Company or Insurer ,Whether effected by the Claimant or by any other Person? If so, state full particulars.....

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.....

(h) Give dates of any previous claims of a similar nature you have made in connection with these or any other premises, and state the amount of the loss.....

DATA PROTECTION NOTICE AND CONSENT

Lasaco Assurance Plc is data protection regulation compliant. All information submitted by you will be processed and managed in line with the Nigeria data protection regulation.

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Sign

Lasaco
Assurance Plc
Reg No. 31126

.....

.....

I..... residing at .....

.....

do hereby declare that this is a full true and accurate statement and I further declare that the articles, mentioned on the other side, being my property, and insured under the above-named Policy or Policies, were destroyed or damaged by the stated occurrence according to the extent and values detailed overleaf, and I thereby the sum of

..... from LASACO ASSURANCE PLC.

As witness my hand this ..... day of ..... 20.....

Signature of claimant .....

Item No	Description Of Items	Cost Price Of Property Or Articles Damaged Or Destroyed	Date Of Purchase	Estimated Value At The Time Of Loss	Value Of The Salvage	Net Amount Claimed After Deduction Of The Salvage