

Plate Glass Claim Form

The issue of this form is not to be taken as an admission of Liability

Policy No. _____ Claim No. _____

Name of Insured _____

Address _____

Address where breakage occurred _____

Nature of Business _____ Date of Breakage _____

Date of Last Premium _____

Size and description of glass broken (whether plate or sheet and if ornamental)

Position of glass (whether in house, shop window, door, fanlight, show case etc)

Cause of breakage

Name and address of person who broke the glass

Witnesses _____

Whether cracked or smashed _____ please indicate in sketch below:



Estimated salvage

Policyholders are reminded that all salvage must be preserved.

I declare the foregoing particulars to be true and correct and undertake to render every assistance in my power in dealing with this matter.

Signature _____ Date _____