

HORSE & LIVESTOCK INSURANCE CLAIM FORM

The provision of this form by Coverforce is not an admission of liability or acceptance by Coverforce of your claim.

Insured/s name in full: _____ Date of Birth _____

Are you registered for GST: Yes No If Yes, ABN No: _____ ITC Proportion _____

Postal Address: _____

Phone Number (Office Hours): _____ Mobile Number: _____

Address where animal was kept: _____

Email Address: _____ Policy Number: _____

DESCRIPTION OF ANIMAL CLAIMED (if insufficient space attach schedule)

Name	Breed	Brand & Colour
Sex	Date of Birth	Sum Insured
		\$

GENERAL QUESTIONS - All must be fully answered (attach further details if insufficient space)

1. Date and time veterinary surgeon first attended? _____ AM / PM

2. Name and address of veterinary surgeon? _____

Enclose a copy of the veterinary report, diagnosis & autopsy to this claim for the animal.

3. Type of Claim Mortality/Theft Loss of Use

4. Give the date and time that the animal died or was destroyed: _____ AM / PM

5. What was the current value of the animal at the time of occurrence and why? : \$ _____

6. Give the date and place that the animal sustained the injury: _____

7. Cause of illness or injury? _____

8. Who was in charge of the animal at the time of the illness or injury? _____

9. If illness or injury was caused by the apparent negligence of any person, give name, address, occupation and reason for you thinking so?

10. Was salvage obtained from the carcass, if so please enter amount and receipt? \$ _____

11. Give details of previous treatment or medication administered to this animal whilst in your possession?

12. Have you received livestock insurance payments before? If yes, please provide details: _____

13. Was the animal, now the subject of this claim, insured elsewhere? _____

14. Has any other person or company any financial interest in this animal? If so please give their name and address and state their interest:

15. Have you ever had:

i	any insurance claim declined?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
ii	any insurance Certificate declined?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

MORTALITY CLAIMS INFORMATION

Situation A: Animal found deceased	
<p>The Coverforce team send you their condolences for your sad loss. We understand this is a difficult time for you, so we have prepared this information sheet to assist as much as possible during this process. Please do not hesitate to contact us if you have any questions.</p>	
Step 1:	<p>Notify the Coverforce Horse & Livestock Team as soon as practically possible: Phone:</p> <p>1300 503 504 Email: horse@coverforce.com.au</p>
Step 2:	<p>Provide to Coverforce within 60 days:</p> <ol style="list-style-type: none"> 1. Claim Form completed by you 2. Veterinary report regarding the death and clinical history 3. If the cause of death is unknown, we will require a Post Mortem examination and report to be conducted by a veterinarian <p>To: Email: claims@coverforce.com.au Fax: 02 9223 1422</p>
Step 3:	<p>Coverforce Claims Manager and our consulting veterinarian will assess the claim.</p>
Step 4:	<p>You will be advised of the claim outcome:</p> <p><u>If declined:</u> You will be provided with the reason for the decision and your rights if not satisfied.</p> <p><u>If accepted:</u> You will be provided with settlement details and required to complete and return a Release Form to the Claims Manager. Once this has been received the Claims Manager will make a request for settlement with Finance and settlement will then be arranged to your nominated bank account.</p>

Situation B: Animal euthanised under veterinary advice

The Coverforce team send you their condolences for your sad loss. We understand this is a difficult time for you, so we have prepared these information sheets to assist as much as possible during this process. Please do not hesitate to contact us if you have any questions.

Step 1:	<p>Notify the Coverforce Horse Team as soon as practically possible that euthanasia on humane grounds has been prescribed by a veterinarian as the only treatment option:</p> <p>Phone: 1300 503m 503 Email: horse@coverforce.com.au</p>
Step 2:	<p>Provide to Coverforce within 60 days:</p> <ol style="list-style-type: none"> 1. Claim Form completed by you 2. Veterinary report and clinical history 3. Euthanasia Certificate <p>To: Email: claims@coverforce.com.au Fax: 02 9223 1422</p>
Step 3:	<p>Coverforce Claims Manager and our consulting veterinarian will assess the claim.</p>
Step 4:	<p>You will be advised of the claim outcome:</p> <p><u>If declined:</u> You will be provided with the reason for the decision and your rights if not satisfied.</p> <p><u>If accepted:</u> You will be provided with settlement details and required to complete and return a Release Form to the Claims Manager. Once this has been received the Claims Manager will make a request for settlement with Finance and settlement will then be arranged to your nominated bank account.</p>