

|   |                      |
|---|----------------------|
| <b>Claims notification for public liability insurance</b> | Your claim reference |
|   | asko Ref. No.        |

|  |   |
|--|---|
| <b>To</b><br>asko assekuranzmakler<br>GmbH Egerbach 58a<br>AT-6334 Schwoich<br>Tel. +43 (0) 5372 / 6 24 60<br>Email: a-info@asko24.com | <b>Policyholder</b> (name, address and email) |
|--|---|

|  |                    |
|--|--------------------|
| Date and time of damage  | Location of damage |
| What was damaged?  |                    |
| Estimated total cost of repair   |                    |
| <input type="checkbox"/> Order to repair the damage has already been placed with                 |                    |
| Name, address, contact details   |                    |
|  |                    |
| <input type="checkbox"/> Damage has been reported to the police                                  |                    |
| Police station, file number  |                    |
|  |                    |
| <input type="checkbox"/> Claims for compensation have already been made by another party, namely |                    |
| Name, address, contact details   |                    |
|  |                    |
| Comments   |                    |
|  |                    |

|   |
|---|
| <b>Party responsible for the damage</b>                   |
| Name, address, contact details, age                       |
|   |
| What is the relationship between the perpetrator and you? |

|   |
|---|
| <b>Who is the owner of the items concerned?</b> |
| Name, address, contact details                  |
|   |
| What is your relationship to the owner?         |

|  |
|--|
| <b>Witness</b>                             |
| Name, address, contact details             |
|  |
| What is the witness's relationship to you? |

