

Head Office

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P& I CLAIM NOTIFICATION FORM

NAME OF SHIP	
NAME OF INSURED	
DATE OF INCIDENT	
LOCATION OF INCIDENT	
NATURE OF INCIDENT (please provide details)	
LOSS OR DAMAGE (please provide details including details of any loss or damage to third-party property including cargo if applicable)	
DETAILS OF ANY PERSONAL INJURY (including name, age and status i.e. crewmember or passenger)	
DETAILS OF ANY WITNESSES	
DETAILS OF ANY PARTY INSTRUCTED BY THE INSURED TO ATTEND ON SITE (e.g. local correspondent / surveyor)	
DETAILS OF LOCAL AGENTS	

Attachments (Please attach any relevant information including (where applicable):

- Master's report
- Note of Protest
- Bill of Lading and/or charterparty
- Third-party claim correspondence
- Photographs