



MARINE CLAIM FORM

(The issue of this form is not an admission of liability)

This form should be completed and forwarded to – Echelon Claims Services
Please tick boxes where appropriate

Trust Name: JLT (The Cruising Yacht Club of SA) Discretionary Trust Arrangement

ABN: 415 582 94 513

1. INSURED DETAILS

Full Name:

Residential Address:

State:

Postcode:

Telephone No:

Occupation:

Mobile No:

2. GST

Are you registered for GST? Yes No

If YES, please enter the Australian Business Number (ABN) and Input Tax Credit (ITC) entitlement percentage below

ABN No. ITC % (at start of current period of cover)

If you fail to advise the availability of an Input Tax Credit or understate its availability, then you may have a liability to pay tax on the claim payment.

IMPORTANT – If more than one named insured is claiming for the loss, please supply details of ABN and ITC percentages applicable to each entity on a separate page and attach to claim form.

3. VESSEL DETAILS

Name of Vessel:

Description of insured Vessel, Motor, Trailer and Equipment

	Make & Model No.	Year Built & Constructed	Reg/Serial No.	Hull Length – Motor HP	Date Purchased
Hull					
Dinghy					
Motor					
Trailer				N/A	

Description of Equipment (including sails if applicable)

Name of Vessel:

Was the vessel in a race?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Details?
Protest lodged (if applicable)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Where can vessel be inspected?	Telephone No.		
Address:			
State:	Postcode:		
If property lost/stolen, has it been reported to Police?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Police Station:	Date Reported:		
Police Officer:	Time Reported:		
Report No:			
What steps were taken to minimise loss/damage?			
Have you ever -			
(a) Had previous claims?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Details
(b) Been refused insurance?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Details
(c) Been charged/convicted of any offence?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
If YES, give details -			

Particulars in relation to Third Parties (if applicable)	
A. DAMAGE TO PROPERTY	
Owner of the Other Vessel	
Name:	Telephone No.
Address:	
State:	Postcode:
Details of the Other Vessel	
Name of Vessel:	Make of Hull:
Name of Insurance Company:	Reg. No:
Were you at fault?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If YES, give reasons -	
Describe the damage to other vessel, motor etc.	
Estimated cost of repairs?	\$ Where is the vessel now?

B. INJURY TO OTHER PEOPLE			
Injured Persons			
Name:			Telephone No.
Address:			
State:			Postcode:
Name:			Telephone No.
Address:			
State:			Postcode:
Was the scene attended to by the Police or other persons(s) of authority?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Give details (including details of injury)
Name and address of any Hospitals, Doctors etc. treating Third Parties -			
Where were the Third Parties when the incident occurred?			
Do you know the Third Party's?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
If YES, how?			

DECLARATION

I/we do hereby declare that the foregoing answers are true and correct, that I/we have in no manner caused the said loss or by any fraud or wilful misrepresentation sought unjustly to benefit by the said event and that the information detailed above is a true and faithful account of the actual loss sustained. AND I/we hereby undertake and agree to notify the Trust's Claims Manager immediately if any of the lost or stolen property mentioned in this claim is subsequently recovered, and at the option of the Trust's Claims Manager, to return the property or to refund the amount of money received, by way of compensation in respect thereof.

"We the undersigned hereby acknowledge and agree to the information contained herein (including our personal information) being shared with the other members of our JLT Discretionary Trust (Trust) as part of the Trust's Risk Management processes and reporting criteria".

Please Print Name:

Signature:

Dated:



Echelon Claims Services
 A division of
Echelon Australia Pty Ltd
 ABN 96 085 720 056

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ECHELON AUSTRALIA PTY LTD

ABN 96 085 720 056

COLLECTION STATEMENT UNDER PRIVACY ACT 1988

In accordance with the Privacy Act 1988 (and subsequent amendments), we Echelon Australia Pty Ltd (Echelon), including Echelon Claims Services, draw your attention to the following:

- We may collect personal information about you.
- We are collecting the information principally for the purpose of approaching the (re)insurance market, placing insurance, assessing and advising you on your insurance needs, claims handling or risk management (depending on your requirements). Other purposes include providing you with information about other Echelon products or services. If you are proposing for or renewing insurance or membership, or membership of a Jardine Lloyd Thompson Discretionary Trust Arrangement (JDT Arrangement), the information is required pursuant to your Duty of Disclosure under the Insurance Contracts Act 1984, the Marine Insurance Act 1909 or at common law.
- The information we collect may be disclosed to third parties including but not limited to (re)insurers, insurance intermediaries, service providers, finance providers, advisers, agents and Echelon related Group companies, such as Jardine Lloyd Thompson Pty Ltd (JLT).
- By providing this information, you agree to us collecting, using and disclosing your personal information as outlined in this Collection Statement.
- If you do not provide all or part of the information requested, we may be unable to process your application or provide other required services, your application for insurance or membership of a JDT Arrangement may be declined or you may prejudice your insurance cover or cover under a JDT Arrangement.
- You have the right to request access to, and correct, any personal information that we hold about you, subject to the provisions of the Privacy Act 1988.
- To assist us in maintaining correct records we ask you to inform us of any changes in your personal information provided as they occur.
- If you provide us with personal information about other individuals, you must ensure that those persons have been made aware of the above matters. Where the information collected relates to health, criminal record or other sensitive information as defined in the Privacy Act 1988, you must obtain it with the individual's consent.
- Our Privacy Policy can be made available on request or can be accessed on JLT's website ((HYPERLINK <http://www.jlta.com.au>)).
- For further information regarding Echelon's Privacy Policy, contact your Account Executive, Claims Manager or the Privacy Officer for JLT and Echelon.
Echelon Australia Pty Ltd, 66 Clarence Street, SYDNEY NSW 2000
Telephone: +61 (0)2 9290 8000

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