

## OPAL TOWER CLAIM FORM

Please complete all sections of the claim form in full. The greater detail which you can provide will assist us in being able to respond to your claim as quickly as possible. Once the claim form has been received by email we will call you within 2 working days to discuss.

The submission of a claim or the confirmation of receipt of a claim is in no way an admission of liability or confirmation that a claim will be accepted in whole or in part.

<b>Name(s)</b>	
Please provide full names of <b>ALL</b> people making this claim	
1. ....	
2. ....	
3. ....	
<b>Apartment Number (if applicable)</b>	
<b>Names of all people residing at apartment (if applicable)</b>	
1. ....	2. ....
3. ....	4. ....
5. ....	6. ....
<b>Full contact details for primary contact</b>	
List Name, Email address and all telephone numbers	
<b>Name:</b> .....	
<b>Email:</b> .....	
<b>Phone:</b> .....	
<b>Residential status</b>	
<input type="checkbox"/> Tenant	
<input type="checkbox"/> Owner/occupier	
<input type="checkbox"/> Landlord	
<input type="checkbox"/> Other [Please describe] .....	

PLEASE SUBMIT THIS CLAIM FOR BY EMAIL TO THE FOLLOWING ADDRESS:

[opaltower@proclaim.com.au](mailto:opaltower@proclaim.com.au)

**Claimed items**

Please provide an estimate of the amount claimed for each item, together with an indication of how each claim amount is calculated (add additional pages if required)

<b>Item</b>	<b>Value</b>	<b>Calculation Method</b>
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**OFFICE USE ONLY**

Claim reference:

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