

Loss Notification Form



Ag Guard Pty Ltd
 ABN 42 168 502 645 | AFS Licence 480716
 Level 1, 58a Willoughby Road, Crows Nest NSW 2065
 Phone 02 8052 3997 Fax +61 2 8088 3879
 Email cropclaims@agguard.com.au | www.agguard.com.au

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|----------------|--|-----------|--|--------|
| Product (Tick) | | Broadacre | | Cotton |
|----------------|--|-----------|--|--------|

Please complete this form and fax it to **(02) 8088 3879** or via Email: cropclaims@agguard.com.au.

If you do not have access to a fax machine or email, please contact Ag Guard on **(02) 8052 3997**

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|-------------------|--|---|--|
| Insured name | | | |
| Policy Number | | Contact Name | |
| Property Name | | Contact Mobile Number | |
| Shire | | Contact Email | |
| Cause of Loss | | Broker Name (if applicable) | |
| Date/Time of Loss | | Broker Contact Number and Email (if applicable) | |

| | | |
|--|---------|---------------|
| Share Farmer details (if applicable and known) | | |
| Name | Insurer | Policy Number |
| | | |
| | | |

| Please indicate damage to all Paddock(s)/ Field(s) | | | | |
|--|-----------|-------------------|------------------|------------------|
| Paddock/Field Name | Crop Type | Paddock Area (ha) | Hectares Damaged | Level of Damage* |
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* Please indicate the level of damage as follows: Low = L; Medium = M; High = H. Please provide a map of the property, indicating which area(s) have been damaged.

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| Notes |
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Please note: If a loss assessor has not contacted you within 48 hours to arrange an inspection, please contact us immediately.

| | | | |
|-----------|--|-------------|--|
| Signature | | Date Signed | |
|-----------|--|-------------|--|