



**FORM OF NOTIFICATION OF CLAIM OR CIRCUMSTANCES OUT OF  
WHICH A CLAIM MAY ARISE**

**PLEASE DO NOT ADMIT LIABILITY TO THE INJURED PARTY.**

*All questions must be answered as fully as possible using additional sheets if necessary.  
Copies of relevant documentation should be attached.*

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1. Full name and address of the Consultant (the "insured"):

Telephone:

Facsimile:

Email:

ABN:

Registered for GST? Y/N

If yes, what %? (eg. 100%, 50%)

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2. Full name and address of the Claimant (party claiming against the Insured) or possible Claimant.

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3. When did the Insured perform the service out of which the claim arises or may arise?

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4. Please provide the name of the person who actually performed the work or against whom the claim or possible claim is principally directed.

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5. On what date did the Insured first become aware of the matter complained of or the circumstance which may give rise to a claim?

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6. On what date was the allegation of negligence or the intimation of a claim (by the Claimant) first made against the Insured?

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7. (a) Was the first intimation verbal or in writing? (If in writing please attach a copy)

(b) If verbal, please give a "first person" account of the conversation.

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8. What (if any) is the amount claimed?

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9. (a) What was the Insured retained (contracted) to do?

(b) Was the Insured's retainer (contract of / for services) evidenced in writing? If so, please attach a copy. If not, please provide appropriate particulars.

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10. Please provide a narrative of the facts and circumstances

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11. Are there additional details about which you wish to advise, or which may be of interest to the Insurers, to provide Insurers with a better understanding of this matter? If so, please provide details (along with supporting documentation).

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I, \_\_\_\_\_ (*print name in full*),

\_\_\_\_\_ (*print position in full*)

of the Insured and on behalf of the Insured declare the above answers to be true AND acknowledge that the Insurer(s) may make its / their decision on indemnity having regard to these answers.

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Signature

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Date