

Insurance company:	Due Date:Excess: \$	
Policy number:	Claim number:	
Name of insured:	Phone number:	
Address of insured:		
Address of breakage:		
How did breakage occur: (Please tick one)	Were the police notified: YES / NO	
☐ Accidental	Police station:	
☐ Storm	Police report #:	
☐ Break and enter	Are you registered for GST purposes?: YES / NO	
Unknown	If YES, what is your ABN:	
☐ Other:	Is the amount of GST you intend to claim less than	
Date of breakage:/	100%?: YES / NO	
Time of breakage: AM / PM	If YES, what percentage?%	
I, the undersigned, acknowledge that the glass/building to my specific instructions. The replacement of the glas the above named insurance company. I further acknow payment, I will immediately forward the full payment. Now Pty Ltd. within 3 working days, I will be liable for a I understand that by signing this document, I indicate glass/building material supplied by Glass Now Pty Ltd. and not directly supplied by Glass Now (e.g. damage to	e that the work has been completed to my full satisfaction and I agree that the were delivered in good working order. The damage, to any other part of the goods repaired, o frames due to corrosion, severe weather conditions, age depreciation etc.) is not warranted ciated with repair of the goods, however caused or arising and whether direct or indirect, are	
	Signed:	
Cash / credit card / cheque	\$	
	Date:	
	for Glass Now Pty Ltd.	
Being for insurance excess.		