

# CNC CLAIMS MANAGEMENT – CLAIM FORM

Failure to submit a Claim Form within 30 days of loss may result in your claim being denied.

Parts **MUST** be kept for a minimum of 90 days.      CLAIM NO:

Customers name:	Contact name:
Customers address:	Telephone No: Fax number: Email address:
Certificate number:	Type of cover:
Start date of Certificate:	Expiry date of Certificate:
<b><i>Your machine's details</i></b>	
Description:	Serial number:
Location of the machine:	Machinery Suppliers name:
<b><i>Incident details</i></b>	
*please delete where applicable <b style="color: red; text-align: center;">PLEASE ENSURE ALL QUESTIONS ARE ANSWERED</b>	
1	a) Date and time of incident b) Date and time machine repaired and in working order c) Number of hours recorded on hour meter at time of incident (if fitted) Note: Use Spindle hours meter, if not fitted use software hours meter, if no meter record zero.
2	Did the incident involve the sudden and unforeseen failure of any part of the machine?  <div style="text-align: right; padding-right: 20px;">*YES / NO</div>
3	Did any accidental loss or consequential damage to the machine occur?  <div style="text-align: right; padding-right: 20px;">*YES / NO</div>
4	Please describe in detail a) the nature and cause of the incident. <u>For operator error claims:</u> b) what the operator did incorrectly; c) any previous incidents whether under an extended protection program or not, where this operator caused damage by incorrect operation of a machine; d) what action has been taken to prevent a repetition of similar damage; e) Name, qualifications and experience in years of operator.

5	a) Is there a planned maintenance contract in place for this machine? b) When was the last planned maintenance carried out on the machine and who did it? c) include copies of the relevant Invoices.	*YES / NO
6	Is the machine serviced in accordance with manufacturer's instructions?	*YES / NO
7	Was the machine manufactured to internationally recognised standards? If so, which?	
8	Was the incident due solely to wear and tear?	*YES / NO
9	Was the repair routine or were there exceptional circumstances causing the repair to take longer than anticipated?	
10	Did parts have to be specially flown in from overseas in order that the repair could be carried out?	*YES / NO
11	Were new or exchange parts used for repair?	NEW / EXCHANGE
12	State exact location where damaged parts can be inspected. <b>Parts MUST be kept for a minimum of 90 days.</b>	
13	Was any accessory not supplied with the original machine being used?	*YES / NO
14	Did the incident occur whilst the machine was in normal use?	*YES / NO
15	Did the incident cause immediate stoppage of the machine?	*YES / NO
16	Did the incident necessitate repair or replacement of a part before normal working could be resumed?	*YES / NO
17	Provide name of the Company carrying out the repair.	

18	How much of the work done includes maintenance?	
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**Costs**

Has Credit been given on Exchange Parts?	Yes / No / Pending	
Total cost of claim <u>before</u> credit	Parts: £	Labour: £
Amount of any credit given	Parts: £	
Total cost of claim <u>after</u> credit	Parts: £	Labour: £
(NB for UK claims exclude VAT)		

**Declaration**

I/We declare that to the best of my/our knowledge and belief, the above details are true

Signature(s) ..... Date: .....

Name(s) .....

Position .....

Address .....

.....

**Please complete and fax this form immediately to CNC on 0845 6521953, post to CNC House, Finmere, Buckingham, MK18 4AR or e-mail: [info@cncasset.co.uk](mailto:info@cncasset.co.uk)**

**By submitting these details you are declaring the information contained in this form to be true to the best of your knowledge and belief.**

- Supporting Documentation check list**
- |                                                        |                |
|--------------------------------------------------------|----------------|
| Invoice for this repair                                | Invoice number |
| Engineers report                                       | Report number  |
| Maintenance records                                    |                |
| Last servicing report                                  |                |
| Operator Training records (Operator Error claims only) |                |