

Please submit this form to [claims@purbeckinsurance.co.uk](mailto:claims@purbeckinsurance.co.uk), copying in [d.cox@purbeckinsurance.co.uk](mailto:d.cox@purbeckinsurance.co.uk) and [n.linacre@purbeckinsurance.co.uk](mailto:n.linacre@purbeckinsurance.co.uk).

**Notification Form:**

**General information:**

Date of Notification:	
Name of Policyholder(s):	
Policy Number:	
Company Name:	
Contact Details (email and phone):	

**Below is a text box in which you are able to provide information relating to your notification. Please be detailed and provide a comprehensive description of the events that have taken place prior to you making this notification. Here are some suggestions of the type of information, but not limited to, that we would like you to consider:**

- What has caused the Notification? (e.g. decline in sales, customer related, supplier related, loss of staff, sales, marketing, cash flow, administrative, dispute etc.)
- How long has the business been experiencing difficulties for?
- Are you up to date with HMRC?
- Are you up to date with payments to your lender?
- Can you confirm that you have read and understood your Policy and that this notification is being made in line with the Policy requirements?

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