PRECIOUS METAL OBJECTS – CLAIM SETTLEMENT REPORT

Policy number: Claim number: Product: Name of claimant:

Description of damaged object									To be completed by representative of AEGON Magyarország Zrt.				
Item	Detailed description	Precious stone		Origin		Gramme(s)	Carat	Purchase price (Ft)	Additions, more details to the description of the object	Gramme(s)	Karát	Unit price (Ft)	Amount of compensation (Ft)
		Size	Quality	Place	Date								
1													
2													
3													
4													
5													
6													
7													
8													

Amount brought over:

Total:

Upper limit of compensation depending on insurability or protection:

Place of barcode

Dated: , day/month/year

Signature of claimant:

Dated: , day/month/year

Signature of claim assessor:

Code of claim assessor:

Signature of claimant:

Page: