

DVA GmbH, Property, Engineering and Marine Insurance Department (SAV)
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Notification of Loss/Damage - DVA Rolling Stock All Risk Insurance (RSA)[®]

Policy Holder

Policy Holder/Company:

Contact Person:

Telephone/Fax.:

E-mail:

Policy No.:

Deductible:

EUR

Information about Loss/Damage

Date of loss/damage:

Location of loss/damage:

Damaged item:

(Serial no.)

(Int. no.)

Estimated amount of loss/damage:

EUR

Cause of loss/damage

Derailment

Fire/explosion

Breakdown

Natural hazards

Collision

Other

Description of loss/damage – how did the loss/damage occur, what was its probable cause

Authority reports (was the occurrence already been recorded by/reported to the authorities?)

Name:

Address:

(e. g. police, fire brigade, infrastructure operators)

File/journal no.:

Driver

Name:

Address:

Employed by: Member of our company

Please advise every claim exceeding the deductible (in advance via phone!).

Please attach photos of damaged parts/items, reports and further information (e. g. was another party liable for causing the loss?).

Place/Date:

Company Stamp/Signature: