Mail Print Reset

Record of private customer time

Name / policyholder:
Phone:
Email:
Postcode, place:

Claim no.
Loss event of:

Office Property Insurance Claims
Phone 0800 809 809 or
direct number of the person
responsible for you
Email schaden@axa.ch

Date	Name	Work carried out	No. hours for	
			movable property	building(s)

Page: of

Please send the completed list to schaden@axa.ch. Many thanks!

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