
CONTRACTOR STATEMENT OF DAMAGE

This form is for contractors to submit detailed information about missed damaged or sub-standard repairs.

Owner's name* _____

Address of claim* _____

Claim number* _____

Your name* _____

Your address* _____

Your phone number _____

Your email* _____

Which of the following professions are you?*

A licenced building practitioner

Registered building surveyor

Registered engineer

Licence/registration number* _____

Building details:

Land classification* _____

Number of floors* _____

Age of building* _____

Type of foundation* _____

Type of wall construction* _____

Type of external cladding* _____

Type of roof* _____

Type of internal wall & ceiling linings* _____

Date of your inspection* _____

Type of damage* _____

Missed damage Sub-standard repairs

Tick both boxes if relevant

All fields marked with a * are mandatory.

Identify date(s) of relevant repairs

Description of damage and cause*

Please summarise the extent of missed damage or sub-standard repairs and why you believe this damage is earthquake related.

Do you recommend further investigation or reporting*?

No Structural engineer Geotechnical engineer Other

Please provide details on the recommended investigation*

Signature* _____ Date* _____

By submitting this form you confirm that you are a current licenced building practitioner surveyor or a registered engineer and have inspected the property yourself.



Please send this signed and completed form with the requested information to EQC by email or post.

Scan and email to:
claims@eqc.govt
(please add claim number in subject line)

Post to:
Earthquake Commission
PO BOX 311, Wellington, 6140