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## 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.

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Identify date(s) of relevant repairs

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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.

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Do you recommend further investigation or reporting\*?

No       Structural engineer       Geotechnical engineer       Other

Please provide details on the recommended investigation\*

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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.nz  
(please add claim number in subject line)

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