

# Loss of business profits - claim form

## Section 1 - your details

I	Postcode:	
Telephone number:		
Are you registered for VAT? (please tick): Yes No		
If yes, please provide your VAT number:		
Bank:		
	for VAT? (please tick): Yes No	

# What services does your business provide?

What are your usual trading hours? Please include which days of the week you are open and the times you are open on each trading day

# Please tell us about any disruption you have suffered as a result of our work.

To help us assess your claim, please provide details of any changes of trading patterns, any parking issues and any impact on customers getting to and from your business

#### Your insurance details

Insurer name:		
Insurer telephone number:		
Contact name:		
Policy number:		
Does your policy cover loss	of business due to working in the highway? Yes 📃 No 🗌	
Our works		
What dates was the work ca	arried out near your business?	
When did you receive notifi	cation of the works?	
Between what hours did the	e work take place?	
Was it continuous during those hours? Yes No		
If no, please provide more information:		

# Plans and photographs

Please provide relevant photographs, maps and/or plans of the works (e.g. images of work in progress close to your business, or maps marking the work site in relation to your business) to support your claim, please attach them to the form. **We have a 10MB limit for emails**, so if your content exceeds that, please split across multiple clearly marked emails or get in touch via <u>awsestates@savills.com</u> to arrange secure file transfer.

## **Financial information**

So that we can process your claim, we will need to ask for financial information about your business so that we can accurately assess how you have been impacted.

Please provide us with copies of the following. You can submit these as attachments in PDF format (maximum total file size 10MB, see Plans and photographs above).

- 1. An assessment of the total financial loss your business has incurred as a direct result of Anglian Water's work. Please provide us with calculations to show how you have arrived at this figure.
- 2. Weekly/monthly management or other weekly/monthly trading records for two years prior to the works and the period during which the works were being conducted by Anglian Water.
- 3. The last three years' audited accounts detailing the gross profit rate of the business.
- 4. VAT returns for the last four quarters, or as submitted if not on quarterly scheme (only applicable).
- 5. Any other information you feel is relevant to the claim for compensation. This should include any other costs you have incurred as a result of the works being conducted.

#### **Claim summary**

Please confirm the amount of compensation you are seeking:

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# **Additional information**

If there is anything not covered by this form which you feel is relevant and would like to share with us, please add details below.

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If you have any questions about how to complete the claim form, please contact us via <a href="mailto:awsestates@savills.com">awsestates@savills.com</a>

## Signature (PRINT NAME)

Ι	certify that the above details are true and correct*
Signed:	
Position:	
Date:	

The form must be signed by the claimant or an authorised director if the claimant is a limited company. A signature from an agent will not be accepted.

# **Appointment of agent**

If you are appointing an agent to manage this matter on your behalf, please complete the section below:

I/we:			
Confirm that we wish to instruct:			
Name:			
Company:			
Email:			
Telephone number:			

To act on our behalf in relation to this claim.

Signed: \_\_\_\_\_