



Claim for Damages Form

Form submission instructions are indicated at the end of this document.

In order to provide an accurate assessment of your claim please ensure that we receive this Claim for Damages Form and any supporting information and/or documentation.

*indicates a mandatory field

▼ APPLICANT INFORMATION

Name (Account Holder)*:		Account Number*:	
Phone Number (Primary)*:		Phone Number (Secondary):	
Email Address:			
Mailing Address	P.O. Box:	Street Number*:	Street Name*:
Unit/Apt. Number:	City*:	Province*:	Postal Code*:

▼ CLAIM DETAILS

Date of Incident*:	Time of Incident*:
Location of Incident*:	
Were you at the property when the incident occurred?*	
Please describe what happened and how it resulted in damage to your property.*:	

PROPERTY DAMAGE				
Description (Include size, make, model, etc.)	Year of Purchase (Age of item)	Cost of Repair	Estimated Value of New Item (If repair not possible)	Supporting Documents Included
Total		\$	\$	

This form is provided “without prejudice” and without admitting any legal liability on the part of Hydro Ottawa.
 I acknowledge that the information I provided is accurate and complete.

Signature* _____ Print Name* _____ Date* _____

▼ **FORM SUBMISSION**

Once completed, please submit your form to Hydro Ottawa using one of the methods listed below.
 Attach copies of supporting documentation, including:

- Receipts, estimates, and/or invoices
- Technician’s assessment(s)
- Photos

EMAIL:

claims@hydroottawa.com
 Subject: Claim for <Insert Address>

MAIL:

Hydro Ottawa Limited,
 Box 8700, Ottawa, ON K1G 3S4

Attn: Hydro Ottawa Claims Management

QUESTIONS? Please contact Customer Service at 613-738-6400 weekdays between 8:00 a.m. and 8:00 p.m. and Saturdays between 9:00 a.m. and 3:00 p.m. (Excluding statutory holidays)