

# Claim submitted to Enbridge Gas Inc.

Please type or print clearly all of the information requested on this form and complete each section.

**IMPORTANT: Please attach all supporting documentation to this claims form.**



## Claimant information

Corporation/business name:

Mr.  Mrs.  Ms.

Last name:

First name:

Address of occurrence:

City:

Province:

Postal code:

Mailing address (if different from above address):

City:

Province:

Postal code:

Main contact phone:

Enbridge Gas account number (if a current customer):

Date of occurrence (dd/mm/yy):

Email address:

Total amount claimed:

If the claim relates to a residential property:

Are you the owner?  Are you a tenant?

Description of events (please provide detailed information about your claim):

List of documents attached to this claims form:

Today's date (dd/mm/yy):

Claimant signature:

### Please return your completed claims form by:

Email: [claims\\_department@enbridge.com](mailto:claims_department@enbridge.com)

Mail: 500 Consumers Road  
Toronto, ON M2J 1P8  
ATTN: Claims Dept

**Property claims related to meter reading: please ensure your claim is submitted as soon as possible, and within 30 days. If there is an unreasonable time period between the alleged damage and the receipt of your claim, it is difficult to review evidence and investigate the claim.**

Please allow a minimum of 90 days from date of receipt to be contacted for a status update.

Prior to any settlement funds being paid, the claimant will be required to sign a full and final release in a form prescribed by Enbridge Gas.