



Unit 16, First Floor, Block D Lifestyle Riverfront Office Park 16 Bosbok Road, Randpark Ridge Tel: 011 791 6602 Fax: 011 791 6361 FSP Number: 4467

CLAIM FORM - GENERAL															
ALL RISK, FIRE, MONEY, THEFT, BUILDINGS COMBINED, SPECIAL PERILS															
POLICY NUMBER: JHB	CLAIM NUMBER				R: JHB/				CERTIFICATE NUMBER						
BROKER NAME															
THE INSURED															
Identity Number															
Address & Postal Code							•								
Occupation of Business															
Contact Details		No:						Address	:						
		No:					Fax N	0:							
	Cell N	lo:													
Address at which the loss or damage occured															
When did the loss occur?	Date							Time							
									I						
Decribe in full how the loss or damage															
occured															
Have you previously suffered a loss?															
Full Description of previous claims															
Were the premises occupied at the time of the loss or damage?															

The issue of this form is not an admission of Liability

How were the premises occupied at the time of the loss or damage?									
Was the loss or damage reported to the police?									
If so, when and where?									
SA Police reference number		Police Station							
Are you the sole owner of the lost or damaged property?									
If not, give full particulars of the other parties concerned									
What is the estimate of the value of the e damage?	R								
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Does the building have a thatch roof?									
Is the lost or damaged property insured under any other policy?									
If so, give full particulars									
I/We warrant the truth of the answers to the above questions and I/we declare that no information has been witheld and that the amount claimed represents my/our loss arising from above stated occurrence.									
Signed at	on								
Signature of the insured									

STATEMENT OF PROPERTY LOST, STOLEN OR DAMAGED	NB CLAIMS IN RESPECT OF DAMAGE TO BUILDINGS MUST BE ACCOMPANIED BY A BUILDER'S ESTIMATE	Amount Claimed								R
		Deduction for wear and tear or value of salvage								TOTAL
		From whom purchased or acquired								
		Date Acquired								
		Description of Property								
		Number								

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