



**PROPERTY LOSS / DAMAGE CLAIM FORM**  
**EIENDOMSVERLIES / -SKADE EISVORM**

BROKER/AGENT		MAKELAAR/AGENT	
POLICY NO.		POLISNR.	
Insured	Name and Occupation	Naam en Beroep	
	Address and (Day) Tel. No	Adres en (Dag) Telefoonnr.	
Loss/ Damage Occurrence	Date and Time of Loss/Damage	Tyd en Datum Verlies/Skade	
	When was the Loss/Damage discovered?	Wanneer is Verlies/Skade ontdek?	
Loss/ Damage Address	Address where Loss/Damage occurred	Adres waar Verlies/Skade plaasgevind het	
	Were premises occupied? By whom?	Was perseel bewoon? Deur wie?	
	If not occupied, when last occupied?	Indien onbewoon wanneer laas was dit bewoon?	
	Purpose of occupation	Met watter doel was die perseel gebruik?	
Cause of Loss/ Damage	Describe fully how the Loss or Damage occurred. (If applicable state how entry was	Beskryf volledig hoe die Verlies of Skade plaasgevind het. (Indien van toepassing meld wyse waarop toegang	
	If Loss/Damage caused by another party, give name and address	Indien Verlies/Skade deur 'n ander persoon veroorsaak is, meld naam en adres	
Previous Loss/ Damage	Have you previously suffered a Loss/Damage?	Het u vantevore verlies of skade gely?	
	If so, give details	Indien wel, verskaf besonderhede	
	If insured, provide name of Insurer	Indien verseker, verstrek naam van versekeraar	
Police	Police Ref. No. and Station and date reported	Polisie verwysingsnr. en Stasie en datum gerapporteer	
Other Interest	Has any other party an Interest in the Insured property e.g. Credit Agreement?	Het enige ander persoon 'n belang in die versekerde eiendom, bv. Krediet-ooreenkoms?	
	If so, give name and interest	Indien wel, meld naam en belang	
Other Insurance	Is there any other insurance covering this Loss/Damage?	Is daar enige ander versekering wat hierdie Verlies/Skade dek?	
	If so, give name of insurer	Indien wel, meld naam van Versekeraar	
Value	Estimated total value of all property insured under the policv	Beraamde totale waarde van al die eiendom verseker onder die polis	
	When last valued?	Wanneer laas is dit gewaardeer?	
Declaration	I / We solemnly declare that I /We have suffered loss of or damage to the property enumerated on the reverse hereof and that the said property was in my / our possession immediately prior to the said loss / damage which occurred in the circumstances described above.		
	Ek / Ons verklaar plegtig dat ek / ons die verlies van of skade aan eiendom, wat agterop beskryf is, gely het en dat genoemde eiendom onmiddelik voor die verlies / skade in my / ons besit was en dat die verlies / skade plaasgevind het as gevolg van die omstandighede hierbo uiteengesit.		
Insured's Signature: _____		Capacity: _____	Date: _____

