



Insurance.

Property damage/loss claim form.

Insured details:

Policy number:

Full name:

Address:

Tel. no.:

Property damage/loss incident:

Date and time of loss or damage or incident:

When discovered?

Place where loss, damage or incident occurred?

Were premises occupied? If so, by whom?

If not occupied, when last occupied?

When discovered?

Purpose of occupation:

Cause of property damage/loss:

Describe fully how the loss, damage or incident occurred stating how entry was gained to premises (if applicable):

If caused by another party, give his / her name, address and contact number:

Previous damage/loss incident:

Have you previously suffered a loss/damage:

If so, give details:

If insured, provide name of insurer:

Police:

Police ref. number, station and date reported:

Other interests:

Does any other party have an interest in the insured property e.g. Instalment sale/Finance Agreement?

If so, provide name and interest:

Other insurance:

Is this loss/damage covered by any other Insurance?

If so, give name of insurer:

Value:

Estimated total value of property insured (not value of claim):

When last valued:

Statement of property lost, stolen or damaged.

Please attach all relevant quotes.
Failure to provide all details may prejudice your claim.

Number	Description of property	Date acquired	From whom purchased or acquired	Amount claimed

Please note: It is important that you notify the insurers immediately when you become aware of any pending prosecution, inquest or demand.

Declaration:

I/We hereby declare the foregoing particulars to be true and correct in every respect. I/We understand that false/incorrect details may affect the outcome of the claim.

I/We authorise The Underwriter and BMW Insurance through (Guardrisk), the duly authorised agent, LGI Consultants CC, to obtain any incriminating information in my name held by the South African Police Service.

I/We furthermore authorise the South African Police Service to furnish any possible convictions and/or any relevant information such as is usually furnished by the Criminal Record Centre of the South African Police Service in this regard. You acknowledge that the information provided will be used to process your claim to BMW Insurance (Guardrisk) and its duly authorised agent.

Signature of insured

Signed on DD / MM / YYYY