



EISVORM CLAIM FORM

VIR ALLE RISIKO'S, BRAND, GELD, HUISBEWONERS, HUISEIENAARS, INBRAAK, SAAMGEVATTE, SPESIALE GEVARE

FOR ALL RISKS, FIRE, MONEY, HOUSEHOLDERS, HOUSEOWNERS, BURGLARY, COMBINED, SPECIAL PERILS

TAKNR BRANCH NO.	POLISNR. POLICY NO.	SERTIFIKAATNR. CERTIFICATE NO.	EISNR. CLAIM NO.
MAG-, PENSIOEN-, SALARIS OF PERSONEELLID NR. FORCE, PENSION, SALARY OR PERSONNEL NO.	NAAM VAN GROEPSKEMA NAME OF GROUP SCHEME		

1. DIE VERSEKERDE / THE INSURED

Naam Name	Identiteitsnr. Identity No.	
Adres Address	Poskode Postal code	
Beroep of besigheid Occupation or business	Telefoonnr. Telephone No.	Huis Home
2. Adres waar die verlies of skade plaasgevind het. Address at which the loss or damage occurred.		Besigheid Business
3. Wanneer het die verlies of skade plaasgevind? When did the loss or damage occur?	Datum Date	Tyd Time
4. Beskryf volledig hoe die verlies of skade plaasgevind het. Describe fully how the loss or damage occurred.		
5. Het u al vantevore skade gely? Have you previously suffered a loss?	Volle beskrywing van vorige eise/verliese Full description of previous claims/losses	
6. Was die perseel ten tyde van die verlies of skade bewoon? Were the premises occupied at the time of the loss or damage?	Indien nie, wanneer was dit laas bewoon If not, when was it last occupied	
7. Vir watter doel was die perseel ten tyde van die verlies of skade gebruik? How were the premises occupied at the time of the loss or damage?		
8. Is die verlies of skade by die polisie aangemeld? Was the loss or damage reported to the police?	Indien nie, hoekom nie? If not, why not?	
Indien wel, wanneer en waar If so, when and where	S.A. Polisie verwysingsnr. S.A. Police reference no.	
9. Is u die alleen-eienaar van die eiendom wat verloor of beskadig is? Are you the sole owner of the lost or damaged property?	Indien nie, verskaf volle besonderhede van ander belanghebbendes If not, give full particulars of other parties concerned	
10. Is daar 'n verband op die eiendom? Is there a bond on the property?	Naam van verbandhouer Name of bondholder	
11. Wat is u beraming van die waarde van die hele inhoud van die perseel ten tyde van die verlies of skade. What is your estimate of the value of the entire contents at the time of the loss or damage?		
12. Wat is u raming van die waarde van die gebou(e) ten tyde van die verlies of skade? What is your estimate of the value of the building(s) at the time of the loss or damage?		
13. Het die gebou(e) 'n rietdak? Has the building(s) a thatch roof?		
14. Is die eiendom wat verloor of beskadig is kragtens enige ander polis verseker? Is the lost or damaged property insured under any other policy?	Indien wel, verstrek volle besonderhede? If so, give full particulars?	

Ek/Ons waarborg die waarheid van die antwoorde op die bogenoemde vrae en ek/ons verklaar dat geen inligting verswyg is nie en dat die bedrag geëis my/ons verlies wat uit die genoemde gebeure ontstaan het verteenwoordig.
I/We warrant that the truth of the answers to the above questions and I/we declare that no information has been withheld and that the amount claimed represents my/our loss arising from the above stated occurrence.

Geteken te Signed at	Op On	Handtekening van Versekerde Signature of Insured
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DIE UITREIKING VAN HIERDIE VORM IS NIE 'N ERKENNING VAN AANSPREEKLIKHEID NIE.
THE ISSUE OF THIS FORM IS NOT A ADMISSION OF LIABILITY.

