



**moosa allee**  
**insurance brokers** c.c.

CK 1986/12675/23

Authorised Financial Service Provider - Licence No. 14514

## WINDSCREEN DAMAGE CLAIM

Every question must be answered fully, the abbreviation N/A should be used where the question is not applicable. The company does not admit liability by the issue of this form.

Elke vraag moet volledig beantwoord word. Die afkorting N.V.T. behoort gebruik te word waar die vraag nie van toepassing is nie. Die maatskappy erken geen aanspreeklikheid met die uitreiking van hierdie vorm nie.

|                       |                                                                                                                                                          |                                                                                  |                                |              |
|-----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|--------------------------------|--------------|
| INSURED<br>VERSEKERDE | Name in full<br>Naam voluit                                                                                                                              |                                                                                  |                                |              |
|                       | Address<br>Adres                                                                                                                                         |                                                                                  |                                |              |
|                       | Occupation<br>Beroep                                                                                                                                     | Policy No.<br>Polisnr.                                                           |                                |              |
|                       | Telephone no(s)<br>Telefoonnr(s)                                                                                                                         | Box No.<br>Posbusnr.                                                             |                                |              |
| DRIVER<br>BESTUURDER  | Name<br>Naam                                                                                                                                             | Age<br>Ouderdom                                                                  |                                |              |
|                       | Driver's Licence No.<br>Nr. Van Rybewys                                                                                                                  | Date Issued<br>Datum uitgereik                                                   | Where Issued<br>Waar uitgereik |              |
| VEHICLE<br>VOERTUIG   | Make<br>Fabrikaat                                                                                                                                        | Model<br>Model                                                                   | Registration<br>Registrasie    | Year<br>Jaar |
|                       | Purpose for which vehicle was being used at time of loss<br>Doel waarvoor voertuig gebruik is ten tyde van die verlies                                   |                                                                                  |                                |              |
| ACCIDENT<br>ONGELUK   | Date<br>Datum                                                                                                                                            | Place where breakage occurred<br>Plek waar breekskade aangerig is                |                                |              |
|                       | State how breakage occurred<br>Beskryf hoe skade aangerig is                                                                                             |                                                                                  |                                |              |
|                       | If insured was not present, when was breakage reported to him?<br>As die versekerde nie teenwoordig was nie, wanneer is berig van skade aan hom gebring? |                                                                                  |                                |              |
| DAMAGE<br>SKADE       | Indicate nature of damage to glass on sketch<br>Dui die aard van windscherm se skade op skets aan                                                        |                                                                                  |                                |              |
|                       | Is immediate or future replacement required?<br>Moet dit onmiddellik of later vervang word?                                                              |                                                                                  |                                |              |
|                       | Repairer's Name<br>Hersteller se naam                                                                                                                    | Estimate<br>Raming                                                               | R                              |              |
|                       | Where may vehicle be inspected?<br>Waar kan voertuig ondersoek word?                                                                                     |                                                                                  |                                |              |
|                       | I/We declare the foregoing particulars to be true in every respect.<br>Ek/Ons verklaar dat bostaande besonderhede in alle opsigte waar is.               |                                                                                  | Date<br>Datum                  |              |
|                       | Signed/Geteken:                                                                                                                                          |                                                                                  |                                |              |
|                       | Insured<br>Versekerde                                                                                                                                    | Driver, if other than insured<br>Bestuurder, indien hy nie die versekerde is nie |                                |              |