



	BROKER/AGENT		MAKELAAR / AGENT	
INSURED	POLICY NUMBER		POLISNR.	VERSEKERDE
	NAME AND OCCUPATION		NAAM EN BEROEP	
	VAT REGISTRATION NUMBER		BTW REGISTRASIENR.	
	ADDRESS AND (DAY) TEL. NO.		ADRES EN (DAG) TELEFOONNR.	
LOSS / DAMAGE OCCURRENCE	DATE AND TIME OF LOSS/DAMAGE		TYD EN DATUM VAN VERLIES / SKADE	VERLIES /SKADE VOORVAL
	WHEN WAS LOSS/DAMAGE DISCOVERED?		WANNEER IS VERLIES/ SKADE ONTDEK	
LOSS/ DAMAGE ADDRESS	ADDRESS WHERE LOSS/ DAMAGE OCCURED		ADRES WAAR VERLIES/ SKADE PLAASGEVIND HET	VERLIES / SKADE ADRES
	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/DAMAGE OCCURRED. (IF APPLICABLE STATE HOW ENTRY WAS GAINED TO PREMISES)		BESKRYF VOLLEDIG HOE DIE VERLIES OF SKADE PLAASGEVIND HET. (INDIEN VAN TOEPASSING MELD WYSE WAAROP TOEGANG TOT DIE PERSEEL VERKRY IS)	OORSAK VAN VERLIES / SKADE
	WAS BURGLAR ALARM ACTIVATED?		WAS DIE DIEFALARM GEAKTIVEER?	
	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 LOSS/DAMAGE?		HET U VANTEVORE VERLIES / SKADE GELY?	VORIGE VERLIES / SKADE
	IF SO, GIVE DETAILS		INDIEN WEL, VERSKAF BESONDERHEDE	
	IF INSURED, PROVIDE NAME OF INSURER		INDIEN VERSEKER, VERSTREK NAAM VAN VERSEKERDE	
POLICE	POLICE REF. NO. AND STATION AND DATE REPORTED		POLISIE VERWYSINGSNR. EN – STASIE EN DATUM GERAPPOORTEER	POLISIE
OTHER INTEREST	HAS ANY OTHER PARTY AN INTEREST IN THE INSURED PROPERTY, EG HIRE PURCHASE?		HET ENIGE ANDER PERSOON 'N BELANG IN DIE VERSEKERDE EIENDOM, BV. HUURKOOP	ANDER BELANG
	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?	ANDER VERSEKERING
	IF SO, GIVE NAME OF INSURER		INDIEN WEL, MELD NAAM VAN VERSEKERAAR	
VALUE	ESTIMATED TOTAL VALUE OF ALL PROPERTY INSURED UNDER THE POLICY		BERAAMDE TOTALE WAARDE VAN AL DIE EINDOM VERSEKER ONDER DIE POLIS	WAARDE
	WHEN LAST VALUED		WANNER LAAS GEWAARDEER?	
DECLARATION	<p>I / WE SOLEMNLY DECLARE THAT I/WE HAVE SUFFERED LOSS 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.</p> <p>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 IM MY/ONS BESIT WAS EN DAT DIE VERLIES/SKADE PLAASGEVIND HET AS GEVOLG VAN DIE OMSTANDIGHEDEN SOOS HIERBO UITEENGESIT.</p> <p>INSURED'S SIGNATURE VERSEKERDE SE HANDTEKENING.....</p> <p>CAPACITY HOEDANIGHEID.....</p> <p>DATE DATUM.....</p>			VERKLARING
PLEASE COMPLETE REVERSE SIDE • VOLTOOI ASSEBLIEF OOK DIE KEERSY				

