



Reef Insurance Brokers (Pty) Ltd
Reg No 1983/012774/07 | VAT No 4920108786
Reef House, Cnr Mowbray & Bunyan St, Benoni, 1501
PO Box 1558, Benoni, 1500

PROPERTY LOST | STOLEN | DAMAGED CLAIM FORM

INSURER DETAILS

Name of Insurer _____ Policy Number _____

INSURED DETAILS

Name of Insured _____ Occupation _____

Physical Address _____
_____ Code _____

Contact Number _____ Cellphone Number _____

LOSS | DAMAGE DETAILS

Date of Loss|Damage _____ Time of Loss|Damage _____

When was the Loss|Damage discovered? _____

Place where Loss|Damage occurred _____

Were the premises occupied? Yes ☐ No ☐ If so, by whom? _____

If not occupied, when last occupied? _____

Purpose of occupation _____

Describe fully how Loss|Damage occurred _____

State how entry to premises was gained?
(If applicable) _____

If Loss|Damage was caused by another party, give name & address _____

Has any other party an interest in the insured property?
(E.g. Credit Agreement) _____

Was the Loss|Damage reported to the police? Yes ☐ No ☐ If so, please complete below section

Police Station _____ Police Ref Number _____

Date reported to Police _____

PAYMENT METHOD

You may select, for added security, payment of any amount due to you directly into a bank account.

Name of Bank	_____	Account Holders Name	_____
Branch Name	_____	Branch Code	_____
Account Number	_____	Account Type	_____

DECLARATION

I/We solemnly declare that I/We have suffered loss of or damage to the property detailed on page two 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.

Insured Signature	_____	Capacity	_____	Date	_____
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STATEMENT OF PROPERTY LOST, STOLEN OR DAMAGED

N.B. Claims in respect of damage to building must be accompanied by a builder's estimate.

Description of Property	Qty	Date Acquired	Purchased from	Value	Amount Claimed
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____