



WILLIAMS & KNIGHT
Insurance brokers

Claim form

On completion of the form click the download with changes icon in the top right and email it to

claims@wkbrowsers.com

Property loss/damage

Broker _____

Policy no.	
ID no.	
Claim no.	

Client info			
Name Physical			
address			
		Code	
Phone no.		Work no.	
Occupation			

What happened			
Date of loss/damage		Time of loss/damage	
When was loss/damage discovered			
Who discovered the loss			
Name			
Physical address			
		Code	
Where did the loss/damage occur			
Was the premises occupied			Yes No
By whom			
If not, when was it last occupied			
How did the loss/damage occur and describe how entry was gained to the premises			

What measures did you take to prevent the loss			
Describe the precautionary measures that should be taken to prevent such losses in future			
Witnesses			Yes No
If the loss/damage was caused by another party, state whom			
Name			
Physical address			
		Code	
Phone no.		Work no.	
Value of the radio accessories		N\$	
Date reported		Police case no.	
Police station			

Previous loss or damage	
Describe any previous loss/damage	
If you were insured, state the name of the insurer	
Other interests	
Does any other party have interest in the insured property (for example, a credit agreement)	Yes No

Value of property	
What's your estimate of the total value of the property insured under the policy (with the exclusion of motors)	
When was it last valued	
By whom	

Other insurance	
Is there any other insurance covering this loss/damage If so, state the name of the insurer	Yes No
Policy no.	

Banking details			
Bank			
Account holder			
Account no.			
Account type	Cheque	Transmission	Savings
Branch code			
Branch name			

Declaration

I've/we've solemnly declare that I/we have suffered loss/damage to the property indicated on this claim form and that this property was in my/our possession immediately before the loss/damage occurred as described above.

Client's signature

Date

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