

**Insured:** Full Name: \_\_\_\_\_  
**Versekerde:** Volle Naam: \_\_\_\_\_

Address: \_\_\_\_\_  
 Adres: \_\_\_\_\_

Occupation: \_\_\_\_\_  
 Beroep: \_\_\_\_\_

Telephone No.(s) \_\_\_\_\_ Box No: \_\_\_\_\_  
 Telefoonnr.(-s) \_\_\_\_\_ Posbusnr.: \_\_\_\_\_

**Driver:** Name: \_\_\_\_\_ Age: \_\_\_\_\_  
**Bestuurder:** Naam: \_\_\_\_\_ Ouderdom: \_\_\_\_\_

Driver's licence no.: \_\_\_\_\_ Date issued: \_\_\_\_\_ Where issued: \_\_\_\_\_  
 Bestuurder se Rybewysnr.: \_\_\_\_\_ Datum uitgereik: \_\_\_\_\_ Waar uitgereik: \_\_\_\_\_

**Vehicle:** Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Registration: \_\_\_\_\_  
**Voertuig:** Fabrikaat: \_\_\_\_\_ Model: \_\_\_\_\_ Jaar: \_\_\_\_\_ Registrasie: \_\_\_\_\_

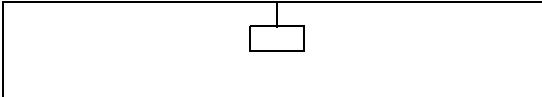
Purpose for which the vehicle was being used at time of accident:  
 Doel waarvoor die voertuig gebruik is ten tyde van die ongeluk: \_\_\_\_\_

**Accident:** Date: \_\_\_\_\_ Place where breakage occurred: \_\_\_\_\_  
**Ongeluk:** Datum: \_\_\_\_\_ Plek waar breekskade plaasgevind het: \_\_\_\_\_

State how breakage occurred:  
 Beskryf hoe skade aangerig is: \_\_\_\_\_

If Insured was not present, when was breakage reported to him? \_\_\_\_\_  
 Indien die Versekerde nie teenwoordig was nie, wanneer is hy van die skade in kennis gestel? \_\_\_\_\_

**Damage:** Indicate nature of damage to glass on sketch:  
**Skade:** Dui die aard van beskadiging van glas op skets aan:



Is immediate or future replacement required?  
 Moet dit onmiddelik of later vervang word? \_\_\_\_\_

Repairer's name: \_\_\_\_\_ Estimate R \_\_\_\_\_  
 Hersteller se naam: \_\_\_\_\_ Raming \_\_\_\_\_

Where may vehicle be inspected?  
 Waar kan voertuig ondersoek word? \_\_\_\_\_

I/We declare the foregoing particulars to be true in every respect. \_\_\_\_\_ Date: \_\_\_\_\_  
 Ek/Ons verklaar dat bostaande besonderhede in alle opsigte waar is. \_\_\_\_\_ Datum: \_\_\_\_\_

Signed/Geteken: \_\_\_\_\_

Insured: \_\_\_\_\_ Driver, if other than Insured: \_\_\_\_\_  
 Bestuurder, indien verskillend van Versekerde: \_\_\_\_\_

Please answer all questions as fully as possible. The company does not admit liability by the issue of this form.

Beantwoord asseblief alle vrae so volledig moontlik. Die Maatskappy erken geen aanspreeklikheid met die uitreiking van hierdie vorm nie.