



PROPERTY LOSS/DAMAGE CLAIM FORM:

INSURED:

Full Name & Surname: _____

ID Number: _____

Policy Number: _____ Claim No: _____

Telephone (w): _____ Telephone (h): _____

Occupation: _____

Address: _____

Area Code: _____

Details of previous loss/damage:

LOSS / DAMAGE OCCURRENCE:

Date and time of loss/damage: _____

When was the loss/damage discovered: _____

Who discovered the loss/damage: _____

Location: _____

Area Code: _____

Was the premises occupied: _____

By whom: _____

If not when was it last occupied: _____

Describe in details how the loss/damage occurred, and how entry was gained:



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Describe the nature of precautionary measures taken to prevent such loss in the future:

If loss/damage was caused by another party, state the following:

Name: _____

Address: _____

Area Code: _____

Telephone (w): _____ Telephone (h): _____

Police Reference No: _____

Police Station: _____

Date Reported: _____

Previous Loss/Damage:

Have you ever suffered any loss/damage before: _____

If so supply details:

If you were insured, indicate the name of insurer: _____

Other Interest:

Does any other party have interest in the insured property, e.g Credit agreement:

If so, state name and interest:

Value:

What is your estimate of the total value of the property insured under the policy:

When was it last valued: _____

By whom: _____

Other Insurance:

Is there any other insurance covering this loss/damage:

If so, state the insurer:

Policy No: _____

Branch: _____

Declaration:

I/We acknowledge the sharing of claims information by insurers is essential to enable the insurance industry to underwrite policies and assess risks fairly and to reduce the incidence of fraudulent claims. In the public interest and with a view to limiting premiums, I/we hereby waive any right to privacy in any insurance or claims information supplied by me or on my behalf in respect of any insurance application or claim made or lodged by me/us and I/we consent to such information being disclosed to any other insurance company or its agent. I/We also waive any rights to privacy and consent to the disclosure of any information relevant to any insurance claim concerning me or any insured person I/We represent. I/We further declare that all the particulars to be true in every respect and correct and I/we understand that if any claim lodged under this policy be in any respect fraudulent or if any fraudulent means or devices be used by me/us or anyone acting on my/our behalf or with my/our knowledge or consent to obtain any benefit under this policy or if any event be occasioned by the wilful act or with the connivance of me/us, the benefit afforded under this policy afforded under this policy in respect of such claim shall be forfeited.

Signature of
Policy Holder

Date:



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List of property lost, stolen or damaged:

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

Description of property:

Date acquired:

From whom purchased or acquired:

Value:

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N.B. It is important that you notify the Insurers immediately you become aware of any impending prosecution, inquest or demand

Personal Information

Your personal information is valued by us, and we respect your constitutional right to privacy. We are committed to processing your personal information in accordance to relevant legislation. We are bound by the terms and provisions of the Protection of Personal Information Act No. 4 of 2013 ("POPI ") regarding the acquisition, usage, retention, transmission, and deletion of your personal information.

Please be advised that your personal information herein collected is for primary purpose of assessing and processing your claim in respect of the loss/damage, to the insured property, which you have suffered. The information submitted on this document is subject to verification and shall be authenticated using lawful procedures. Your information shall be used in complete lawful form and manner to execute all tasks required for efficient assessment and processing of your claims.

All information acquired herein is relevant to the stated purpose. Your personal information may also be collected for certain mandatory purposes, please consult our Consent to Process Personal Information for a list on same.

Your information shall be kept confidential; however, we shall disclose it to certain third parties in accordance with the purpose of collection. The third parties may include our service providers, agents, claim handlers, investigators and other insurers.

The lawful sharing of your personal information with other insurance companies is for the following reasons:

- a. To ensure that not more than one claim has been made for the same damage/loss to property arising from the same set of facts.
- b. To verify that claims information match what was provided when insurance cover was taken out.
- c. If necessitated to act as a basis for investigating claims when our recorded information is incorrect or when we suspect fraudulent activity.

Bryte undertakes to attend to all that is necessary to detect and prevent fraud thus protecting our clients. Bryte, therefore shall utilise and disclose your personal information where essential to substantiate your claim.

All third parties are fully aware and understand the purpose for which the information is transmitted to them. No third party including Bryte shall use your personal information for any other purpose unless expressly consented to by you.

We have implemented high level security measures to safeguard your personal Information against damage loss and unauthorised access. Any party to whom your personal information is been disclosed to is also bound by confidentiality and the provisions of POPI, whereby security measures are.