

New Claims Registration Cover Sheet



Please complete this claim form in BLOCK CAPITALS and send it to your broker or to
Zurich Insurance Company South Africa Limited
 Registration number: 1965/006764/06 VAT number: 4530103581
 15 Marshall Street, Ferreirasdorp 2048 Johannesburg, PO Box 61489, Marshalltown 2107
 Authorised Financial Services Provider 17703

The information that is sought herein is not intended to be an exhaustive list and Zurich accordingly reserves the right to request any further information deemed appropriate while investigating the claim.

To	New Claims	From	
Fax	0860 37 2021	Telephone No.	
Date		Fax	
Number of pages		E-mail	

Broker
Broker's Claim No.
Zurich Policy No. (Compulsary)

Insured	Insured details		
	Insured I.D. number		
	Date of loss		
	Details of claim		
	Policy section	Estimate	
	Make of vehicle	Reg No.	Date

Checklist	General		Yes	No
	Completed claim form		<input type="radio"/>	<input type="radio"/>
	List if goods		<input type="radio"/>	<input type="radio"/>
	Quotes		<input type="radio"/>	<input type="radio"/>
	Group Schemes		Yes	No
	Policy Schedule		<input type="radio"/>	<input type="radio"/>
	Premium Confirmation		<input type="radio"/>	<input type="radio"/>
	Assessor appointed		<input type="radio"/>	<input type="radio"/>
	Motor		Yes	No
	Driver's licence-ENLARGED COPY		<input type="radio"/>	<input type="radio"/>
	Copy of ID document/Driver's I.D. No.		<input type="radio"/>	<input type="radio"/>
	Third party details		<input type="radio"/>	<input type="radio"/>
	VIN number of vehicle		<input type="radio"/>	<input type="radio"/>
	Stolen vehicles additional		Yes	No
Keys and spare keys		<input type="radio"/>	<input type="radio"/>	
Deregistration certificate		<input type="radio"/>	<input type="radio"/>	
Copy of registration document		<input type="radio"/>	<input type="radio"/>	