



## Motor Theft Claim Form/Motordiefstal Eisvorm

Underwritten by Centriq Insurance Company Limited, a licensed non-life insurer

|                    |                                                       |  |           |                                                          |                      |
|--------------------|-------------------------------------------------------|--|-----------|----------------------------------------------------------|----------------------|
| INSURED            | COMPANY NAME/<br>SURNAME & INITIALS                   |  |           | MAATSKAPPY NAAM/ VAN<br>EN VOORLETTERS                   | VERSEKERDE           |
|                    | COMPANY REGISTRATION<br>NUMBER                        |  |           | MAATSKAPPY SE<br>REGISTRASIE NOMMER                      |                      |
|                    | IDENTITY NUMBER                                       |  |           | IDENTITEITSNOMMER                                        |                      |
|                    | VAT NUMBER                                            |  |           | BTW NOMMER                                               |                      |
|                    | OCCUPATION OR NATURE<br>OF BUSINESS                   |  |           | BEROEP OF BESIGHEID                                      |                      |
|                    | PHYSICAL ADDRESS                                      |  |           | STRAATADRES                                              |                      |
|                    |                                                       |  |           |                                                          |                      |
|                    | POSTAL ADDRESS                                        |  |           | POSADRES                                                 |                      |
|                    |                                                       |  |           |                                                          |                      |
| TELEPHONE & FAX    | BUSINESS                                              |  | BESIGHEID | TELEFOON EN FAX                                          |                      |
|                    | HOME                                                  |  | TUJS      |                                                          |                      |
| VEHICLE            | MAKE                                                  |  |           | FABRIKAAT                                                | VOERTUIG             |
|                    | MODEL                                                 |  |           | MODEL                                                    |                      |
|                    | YEAR                                                  |  |           | JAAR                                                     |                      |
|                    | REGISTRATION                                          |  |           | REGISTRASIE                                              |                      |
|                    | KILOMETRES COMPLETED                                  |  |           | KILOMETERS AFGELE                                        |                      |
|                    | VIN (VEHICLE<br>IDENTIFICATION NO.)                   |  |           | VIN (VOERTUIG<br>IDENTIFIKASIE NR.)                      |                      |
|                    | CHASSIS NUMBER                                        |  |           | ONDERSTELNOMMER                                          |                      |
|                    | ENGINE NUMBER                                         |  |           | ENJINNOMMER                                              |                      |
|                    | INTERIOR COLOUR                                       |  |           | KLEUR (BINNE)                                            |                      |
|                    | EXTERIOR COLOUR                                       |  |           | KLEUR (BUITE)                                            |                      |
| FINANCE COMPANY    | NAME                                                  |  |           | NAAM                                                     | FINANSMAATSKAPPY     |
|                    | BRANCH                                                |  |           | TAK                                                      |                      |
|                    | BRANCH TELEPHONE<br>NUMBER                            |  |           | TAK TELEFOON NOMMER                                      |                      |
|                    | ACCOUNT NUMBER                                        |  |           | REKENINGNOMMER                                           |                      |
|                    | TYPE OF AGREEMENT                                     |  |           | TIPE OOREENKOMS                                          |                      |
| OWNER              | NAME                                                  |  |           | NAAM                                                     | EIGENAAR             |
|                    | IDENTITY NUMBER                                       |  |           | IDENTITEITSNOMMER                                        |                      |
| OTHER<br>INSURANCE | IS THERE ANY OTHER<br>INSURANCE COVERING<br>THIS LOSS |  |           | IS DAAR ENIGE ANDER<br>VERSEKERING                       | ANDER<br>VERSEKERING |
|                    | IF SO, GIVE NAME OF<br>INSURER AND POLICY<br>NUMBER   |  |           | INDIEN WEL, MELD NAAM<br>VAN VERSEKERAAR EN<br>POLIS NR. |                      |

|                                                                                                                                                                           |                                                |           |                                                                         |                                                            |          |                                                                           |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-----------|-------------------------------------------------------------------------|------------------------------------------------------------|----------|---------------------------------------------------------------------------|
| THEFT                                                                                                                                                                     | DATE                                           |           |                                                                         | DATUM                                                      | DIEFSTAL |                                                                           |
|                                                                                                                                                                           | TIME                                           |           |                                                                         | TYD                                                        |          |                                                                           |
|                                                                                                                                                                           | PLACE                                          |           |                                                                         | PLEK                                                       |          |                                                                           |
|                                                                                                                                                                           | POLICE STATION                                 |           |                                                                         | POLISIE KANTOOR                                            |          |                                                                           |
|                                                                                                                                                                           | POLICE REFERENCE NO                            |           |                                                                         | POLISIE VERWYSINGSNOMMER                                   |          |                                                                           |
|                                                                                                                                                                           | DATE REPORTED                                  |           |                                                                         | DATUM AANGEMELD                                            |          |                                                                           |
|                                                                                                                                                                           |                                                |           |                                                                         |                                                            |          |                                                                           |
|                                                                                                                                                                           |                                                |           |                                                                         |                                                            |          |                                                                           |
|                                                                                                                                                                           | WAS THE VEHICLE LOCKED?<br>IF NOT GIVE REASONS |           |                                                                         | WAS DIE VOERTUIG<br>GESLUIT? INDIEN NIE,<br>VERSTREK REDES |          |                                                                           |
|                                                                                                                                                                           |                                                |           |                                                                         |                                                            |          |                                                                           |
|                                                                                                                                                                           | DETAILS OF ACCESSORIES                         |           |                                                                         | BESONDERHEDE VAN<br>TOEBEHORE                              |          |                                                                           |
|                                                                                                                                                                           |                                                |           |                                                                         |                                                            |          |                                                                           |
|                                                                                                                                                                           | ANTI-THEFT/VEHICLE<br>RECOVERY DEVICE DETAILS  | MAKE      |                                                                         | FABRIKAAT                                                  |          | BESONDERHEDE VAN<br>DIEFWEERTOESTEL/VOERT<br>UIG INVORDERINGS-<br>TOESTEL |
|                                                                                                                                                                           |                                                | FITTED BY |                                                                         | GEINSTALLEER<br>DEUR                                       |          |                                                                           |
|                                                                                                                                                                           |                                                | DATE      |                                                                         | DATUM                                                      |          |                                                                           |
| PLEASE ATTACH PROOF OF DEVICE/HEG ASSEMBLIEF BEWYS VAN TOESTEL AAN                                                                                                        |                                                |           |                                                                         |                                                            |          |                                                                           |
| DETAILS OF WINDOW<br>MARKINGS                                                                                                                                             |                                                |           | BESONERHEDE VAN<br>VENTERGRAVERINGS                                     |                                                            |          |                                                                           |
|                                                                                                                                                                           |                                                |           |                                                                         |                                                            |          |                                                                           |
| DETAILS OF SCRATCHES,<br>DENTS, DEFECTS                                                                                                                                   |                                                |           | BESONDERHEDE VAN<br>KRAPMERKE, DUIKE,<br>DEFEKTE                        |                                                            |          |                                                                           |
|                                                                                                                                                                           |                                                |           |                                                                         |                                                            |          |                                                                           |
| DETAILS OF OTHER<br>FEATURES WHICH WOULD<br>ASSIST IDENTIFICATION                                                                                                         |                                                |           | BESONDERHEDE VAN<br>ANDER KENMERKE WAT<br>KAN HELP MET<br>IDENTIFILASIE |                                                            |          |                                                                           |
|                                                                                                                                                                           |                                                |           |                                                                         |                                                            |          |                                                                           |
|                                                                                                                                                                           |                                                |           |                                                                         |                                                            |          |                                                                           |
| PLEASE ATTACH THE VEHICLE KEYS AND A COPY OF THE REGISTRATION CERTIFICATE<br>HEG ASSEMBLIEF DIE VOERTUIGLEUTELS EN AAN SAAM MIET 'n AFSKRIF VAN DIE REGISTASIESERTIFIKAAT |                                                |           |                                                                         |                                                            |          |                                                                           |

I/WE HEREBY DECLARE THE FOREGOING PARTICULARS TO BE TRUE IN EVERY RESPECT. EK/ONS VERKLAAR HIERMEE DAT DIE  
VOORAFGAANDE BESONDAEHEDE IN ELKE OPSIG WAAR IS.

I consent to Centriq Insurance Company Ltd/Paladin Underwriting Managers (Pty) Ltd, and its operators, processing, and further processing my personal information in accordance with the Protection of Personal Information Act, for the purposes of concluding, and performing in terms of this insurance contract. For further information please read our Privacy Notice, which can be found on [www.centriq.co.za](http://www.centriq.co.za) and/or [www.paladin.co.za](http://www.paladin.co.za)

Signature of Insured  
Versekerde se handtekening

\_\_\_\_\_

Capacity  
Hoedanigheid

\_\_\_\_\_

Date  
Datum

\_\_\_\_\_