

MOTOR ACCIDENT CLAIM FORM

BROKER:	POLICY NO:
INSURER:	CLAIM NO:

1. INSURED

Name:	Occupation:
Address:	
Day contact no:	Cell no:
Email address:	

2. VEHICLE

Make:	Model + year:	KMs completed:
Reg no:	Value:	Gross veh. mass:
Date of purchase:	Price paid:	
In whose name is the vehicle registered?		
If vehicle is subject to Hire Purchase, Credit or Leasing Agreement, state name and address of Finance Company:		

3. DAMAGE

Area of damage to own vehicle:
Estimate for repairs or attach quotation:
Repairer's name:
Repairer's address + contact no:
Where can your damaged vehicle be inspected?

4. DRIVER

Full name:	Occupation:	Date of birth:
Address:		
Driving license no:	Date of issue:	
Place of issue:	Code:	Full or Learner:
Has license ever been endorsed?	Has he / she any physical defects?	
State fully the purpose for which the vehicle was being used:		
Was he / she driving with your permission?	Was he / she in your employ?	
Has he / she any motor insurance on own car? If Yes, state Policy no. and Company:		
Details of any convictions for motoring offences:		
Details of previous accidents:		

MOTOR ACCIDENT CLAIM FORM continued

5. PASSENGERS IN INSURED VEHICLE

Name:	Address:	Details of injury:
For what purpose were they carried?		
Are they employees?		

6. OTHER PARTY (vehicle)

Reg no:	Make:
Name + address of owner:	
Name + address of driver:	
Details of damage:	
Reg no:	Make:
Name + address of owner:	
Name + address of driver:	
Details of damage:	
Reg no:	Make:
Name + address of owner:	
Name + address of driver:	
Details of damage:	

7. OTHER PARTY (property other than vehicles)

Name + address of owner:
Details of damage:
Name + address of owner:
Details of damage:

8. WITNESSES

Name:	Contact no:
Address:	
Name:	Contact no:
Address:	

9. ACCIDENT DETAILS

Date:	Time:	Place:
Speed before accident:	Speed at moment of impact:	
Weather conditions:	Visibility:	
Road surface:	Width of road:	
Which vehicle lights were on?	Street lighting:	
Was any warning given by you – eg. hooting, indicators etc?		
Did a police / traffic officer attend the scene, if so what was his / her name?		
Police station:	Ref no:	Was driver tested for alcohol or drugs?

