

ZIMNAT LION INSURANCE COMPANY LIMITED

CLAIM FORM - THEFT AND "ALL RISKS"

Please state as fully and as accurately as possible the information asked for below.
Acceptance of this form is not an admission of liability by the Company.

Name of Insured..... Occupation

Address..... Telephone

..... Policy No.

GENERAL

Date of loss..... Time

When and by whom was the loss discovered?.....

When was the loss reported to the police..... at which station.....

Full name of person reporting the loss to the police

Have the police investigated the loss?.....

Are you the sole owner of the missing or damaged property?

Are there any other insurances in force upon the same property?

If so please state name of Insurer.....

Have you ever had a previous loss by the perils insured?

If so please give details and name of Insurer

If property was stolen from a BUILDING please state

Address of building.....

Was it occupied at time of loss if unoccupied and a residence, for how many days has it been unoccupied during the current period of insurance?.....

N.B. Access by domestic workers does not count as occupation.....

How was entry effected?.....

What damage was sustained to the building?

Which rooms were entered?.....

If property was stolen from a VEHICLE please state

State make, type and regn. No. of vehicle

Where was it parked at time of theft?.....

What damage did it sustain?.....

Whereabouts in vehicle was property left?

Were the doors and boot locked and windows closed?

How was entry gained?.....

If property was merely LOST is MISSING or is DAMAGED please state

When was the property last in your possession?.....

Where is the property kept normally?.....

Who apart from the owner has access to the premises?.....

In ALL CASES please state

Who do you suspect, if anyone?.....

What value at the time of the loss of

(a) the contents of the premises?

(b) clothing, baggage and personal effects belonging to you/your family?.....

(i) worn.....

(ii) with you away from the private dwelling house

N.B. Please answer (a) or (b) depending which is applicable

Please describe below the full circumstances of the loss omitting the above information and complete the statement of claim overleaf:

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