



Property loss/damage claim form

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Voice Log (if applicable)	Voice Log Date												
	Voice Log Time												
	Telephone Extension												
	Incoming/Outgoing Call	Incoming						Outgoing					
Insured	Policy Number												
	ID Number												
	Name and Surname												
	Address												
	Phone Number												
	Email Address												
Loss/ damage occurrence	Date and time of loss/damage												
	When was loss/damage discovered?												
Loss/damage place	Place where loss/damage occurred												
	Were premises occupied?	YES						NO					
	If YES, by whom?												
	If not occupied, when last occupied?												
	Purpose of occupation												
Cause of loss/damage	Describe fully how the loss or damage occurred stating how (if applicable) entry was gained to premises												
	Was a lightning protection device fitted in case of lightning damage to property contents?	YES						NO					
	If loss/damage was caused by another party give name and address												
Previous loss/damage	Have you previously suffered a loss/damage (in the past three years)?	YES						NO					
	If YES, give details												
	If insured at that time, provide name of insurer												

