

## FAST TRACK GEYSER CLAIM

### Subject to terms and conditions of the policy

Policy no. \_\_\_\_\_

Name of broker \_\_\_\_\_ Email \_\_\_\_\_

Name of insured \_\_\_\_\_

Contact name \_\_\_\_\_ Email \_\_\_\_\_

Telephone \_\_\_\_\_ Cell \_\_\_\_\_

Address where loss occurred \_\_\_\_\_

Body Corporate section no. \_\_\_\_\_ Unit no. \_\_\_\_\_

Date of loss \_\_\_\_\_ Time of loss \_\_\_\_\_

Purpose of occupation \_\_\_\_\_

Has the geyser burst YES      NO

Size of geyser      100 litres      150 litres      200 litres      250 litres

If the geyser was repaired and not replaced, please specify what was repaired

### DETAILS OF RESULTANT DAMAGE

Floors/carpets \_\_\_\_\_

Ceiling \_\_\_\_\_

Cupboards \_\_\_\_\_

Quotation must contain a detailed description of the damage, the size of the affected area and the cost per square metre. Only one quote is required if less than R10 000 and two quotes if more than R10 000.

Have you previously suffered or sustained a damage or a loss YES      NO

If YES, please give details

Is there any other insurance covering this loss/damage YES      NO

If YES, please give details

### PAYMENT DETAILS

Payee      Body Corporate      Unit owner      Managing agent

Name of payee \_\_\_\_\_

Name of bank \_\_\_\_\_ Branch no. \_\_\_\_\_

Account no. \_\_\_\_\_

**Please note that HOLLARD does not accept responsibility for incorrect banking details supplied.**

### PAYMENT DETAILS

I/We warrant that the answers given are true and correct. All details provided on this form are done so honestly and in good faith. This means that The Hollard Insurance Company Ltd has been made aware of all important information and that any incorrect information may mean that the claim may be rejected and the policy cancelled.

**PROTECTION OF PERSONAL INFORMATION**

We care about your privacy. In order to provide you with our service, we and our service providers have to process the personal information you provide us with by completing this document. We will treat this information with caution and we have put reasonable security measures in place to protect it.

Claim form completed by \_\_\_\_\_ Capacity \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_