

Discovery Insure

Motor damage claim form



Broker	Name		
Planholder	Plan number		
	Company name		
	Description of business		
	Contact details	Business number	
		Cellphone number	
Email address			
Contact person			
Vehicle	Make		
	Model		
	Registration number		
	Registered owner		
Finance company (if write off)	Name of institution		
	Type of agreement		
	Account number		
	Settlement amount		
Driver	Name		
	Driving licence details	Number	
		Code	
		Date issued	
		Endorsements	
	Id number		
	Contact number		
	Purpose for which vehicle was used		
	Did the driver have consent to drive the vehicle at the time of the accident?		
	Is the driver an employee of the insured business?		
	Was a breathalyser test done on the driver?		
Does the driver have any physical defects?			
Passengers	Name	Injury	Contact number
	1		
	2		
	3		
	Why were there passengers in the vehicle at the time of the incident?		
Other party	Insurance Company	Make and model of vehicle	Registration number
	Policy number		
	Details of damage		
	Contact number and email address	Insurance company and policy number	Details of damage
	1		
	2		
	3		
Injuries	Name of injured party	Details of injuries	Relationship to accident
	1		
	2		
	3		

Witnesses	Name	Contact number	Relationship to driver	
	1			
	2			
	3			
Incident	Date and time of incident			
	Place of incident			
	Speed	Before accident		At collision
	Weather conditions			
	Visibility			
	Road surfaces			
	Precautionary measures taken to avoid incident			
Description of accident				
<i>Please include a sketch of the accident on a separate page, showing the point of impact and indicating the direction of travel with arrows</i>				
SAPS details	Police station reported to			
	Date reported			
	Reported by			
	Case number			
Please attach copies of driving licence, id and any pictures taken at the scene				
Declaration	We hereby declare that the above information is true in every respect			
	Insured's signature	Date	Capacity	

Please notify insurers immediately of any prosecutions, demands by third parties, or requests to stand witness