

MACHINERY BREAKDOWN - DETERIORATION OF STOCK

Guide for completion

Please complete all sections of this form and note the following:

- The completion of this form does not constitute acceptance of liability by the Insurer
- The Claim Advice Form is required to be returned immediately

The following documentation is required to proceed with the claim:

- A formulated claim which includes quotations/invoices pertaining to the damages
- Photographs of the damages
- A detailed report from the repairers
- Detailed service history and maintenance records
- Preserve the parts affected and make them available for inspection

Note: Quotation/invoice to contain the item description, registration number, serial number, VIN number or engine number

Depending on the information we receive, additional information may be required.

MIRABILIS ENGINEERING UNDERWRITING MANAGERS (PTY) LTD					
MIRABILIS IS AN AUTHORISED FINANCIAL SERVICES PROVIDER: 28190					
	PHYSICAL ADDRESS:	THE PAVILION BUILDING, WANDERERS OFFICE PARK			
		52 CORLETT DRIVE, ILLOVO, 2196	POSTAL ADDRESS:	PO BOX 2081, SAXONWOLD, 2132	
	TEL NO:	0861 100 100 / +27 11 880 8200	FAX NO:	+27 11 880 6857	
	REGISTRATION NO:	2006/018854/07	VAT NO:	4130230354	
	DIRECTORS: CB MEYER (CHIEF EXECUTIVE). SA GRAHAM (EXECUTIVE). G BEAVER (NON-EXECUTIVE CHAIRMAN). ML OLIVIER (NON-EXECUTIVE)				

underwritten by





CLAIM ADVICE FORM – MACHINERY BREAKDOWN

Please complete the form in full and return it immediately.

POLICY NUMBER:	_INSURED:		
BROKERAGE:			
INSURED CONTACT NAME & NUMBERS: Phone / Email / Cell Phone			
RISK ADDRESS			
ITEM NUMBER ON THE POLICY SCHEDULE			
(Make / model / serial number/Year/Hours compl			

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Santam is an authorised financial services provider (FSP 3416), a licensed non-life insurer and controlling company for its group companies





AGE OF MACHINE

NEW REPLACEMENT VALUE (Please supply quote to verify the new replacement value)

IS THERE A MAINTENANCE CONTRACT IN PLACE

DATE & TIME OF LOSS / DAMAGE

DETAILS OF LOSS / DAMAGE (including digital photographs, if available)

DOES ANY OTHER PARTY HAVE AN INTEREST IN THE INSURED PROPERTY (Give full name and interest?)

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NAME AND CONTACT NUMBER OF PARTY RESPONSIBLE FOR CAUSING DAMAGE

ESTIMATED COST OF REPAIR

I / We warrant that the foregoing information provided is true and correct, and that no information has been withheld in respect of the loss / damage. I / We undertake to advise Mirabilis Engineering Underwriters (Pty) Ltd in writing in the event of any changes to supplied information, and in the event of the recovery of any part of the property forming the subject of this claim.

Insured Signature_____

Capacity_____

Date_____

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