



Guardrisk 24 hour claims helpline

0860 222 555

Follow the prompts.

**PROPERTY LOSS
DAMAGE CLAIM FORM**

This form is required in order to assess a potential claim under a policy of insurance. Issue and completion of this form does not in any way imply, construe or admit liability by the Insurer. Only a fully completed form can receive our further consideration. All claims to be reported to notifyclaim@guardrisk.co.za

POLICY NUMBER		
INSURED	Name and occupation	
	Physical address	
	Business description	
	Email address	
	Day telephone number	
LOSS/DAMAGE OCCURENCE	Date and time of loss/damage (DD/MM/YYYY)	
	When was loss damage discovered?	
LOSS/DAMAGE PLACE	Place where loss/damage occurred	
	Were premises occupied? 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 the premises	
	If loss/damage was caused by another party give names and address	
PREVIOUS LOSS/DAMAGE	Have you previously suffered loss/damage?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	If so, give details	
	If insured, provide name of insurer	
POLICE	Police reference number	
	Police station	
	Date reported (DD/MM/YYYY)	
	Officer name	
OTHER INTEREST	Has any other party an interest in the insured property eg: Credit Agreement? If so, give name and interest	
OTHER INSURANCE	Is there any other insurance covering this loss/damage? If so, give name of insurer	
VALUE	Estimated total value of all the property insured under the policy. When last valued?	R
PAYMENT METHOD	You may select, for added security, payment of any amount due to you directly into a bank account. Please specify the name of the bank, branch, account type and account number Name of bank: _____ Branch: _____ Name of account holder: _____ Account number: _____	

STATEMENT OF PROPERTY LOST, STOLEN OR DAMAGED

NB Please attach Assets Listing and Proof of Purchase

NUMBER	DESCRIPTION OF PROPERTY (Serial and assets number)	DATE ACQUIRED	FROM WHOM PURCHASED OR ACQUIRED	AMOUNT CLAIMED

**INFORMATION SHARING
CONSENT OF INSURED**

You agree to share your information

Your personal information is valued by us and we respect your constitutional right to privacy. We are committed to processing your personal information in accordance to relevant legislation. We are bound by the terms and provisions of the Protection of Personal Information Act No 4 of 2013 (“POPI”) regarding the acquisition, usage, retention, transmission and deletion of your personal information.

Please be advised that your personal information herein provided by you or collected is for the primary purpose of assessing and processing your claim in respect of the loss/damage, to the insured property, which you have suffered. The information submitted on this document is subject to verification and shall be authenticated using lawful procedures. Your information shall be used in complete lawful form and manner to execute all tasks required for efficient assessment and processing of your claim. Your information shall be kept confidential; however, we shall disclose it to certain third parties in accordance with the purpose of collection. The third parties may include our service providers, agents, claim handlers, investigators, credit bureaus, Insurance Crime Burea and other insurers.

The lawful sharing of your personal information with other Insurance companies is for the following reasons:

- to ensure that not more than one claim has been made for the same damage/loss to property arising from the same set of facts
- to verify that claims information match what was provided when insurance cover was taken out
- if necessitated to act as a basis for investigating claims when our recorded information is incorrect or when we suspect fraudulent activity.

Guardrisk undertakes to attend to all that is necessary to detect and prevent fraud thus protecting our clients. Guardrisk, therefore shall utilise and disclose your personal information where essential to substantiate your claim. All third parties are fully aware and understand the purpose for which the information is being transmitted to them. No third party including Guardrisk shall use your personal information for any other purpose unless expressly consented to by you. We have implemented security measures to safeguard your personal information against damage loss and unauthorised access. Any party to whom your personal information is being disclosed to is also bound by confidentiality and the provisions of POPI, whereby security measures are enforced to safeguard your personal information.

In terms of POPI we are required to collect and process information which is authentic and accurate. You may amend, update, change or correct your personal information processed by us. You may request to view your personal information held by us and we shall make same available to you. We also store your information for the period prescribed by the Applicable Laws.

Declaration

You hereby give consent to Guardrisk to process, use, share and retain your personal information for its designated purpose. You fully understand the purpose for which your personal information has been collected and you duly consent thereto. You further consent to the lawful sharing and disclosure of your information and understand the necessity of same. You indemnify Guardrisk from any claims resulting from disclosures made with your consent.

You are fully aware and understand your rights duties and obligations to furnish Guardrisk with true and accurate information and your duty to advise Guardrisk of any changes to your personal information timeously. The said consent is given to Guardrisk with the necessary legal capacity, voluntarily and free of intimidation and duress of any form.

I/ we hereby declare the foregoing particulars to be true in every respect.

Full name of insured/claimant Date

Signature of insured/claimant Date

Full name of driver (where applicable) Date

Signature of driver (where applicable) Date

Contact the team



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Follow the prompts.

Wait for the prompts & **choose one** of the below options:

1 Towing assistance following an accident

3 Report a motor glass claim

2 Report motor vehicle theft/hijacking

4 Report a geyser claim

Centralized emails

When **notifying Guardrisk of a new claim** please ensure you have submitted the required documentation for the claim to be validated & registered within our turn-around times.

Motor and non-motor new claims

notifyclaims@guardrisk.co.za

Accident and Health new claims

A&Hclaims@guardrisk.co.za

Sasria new claims

sasriacclaims@guardrisk.co.za

Once the **claim has been registered**, please send all correspondence including the claim number to:

Claims queries

correspondenceclaims@guardrisk.co.za



Download and save Guardrisk Claim forms and helpful hints guide.