



Santova

Santova House 88 Mahatma Gandhi Road Durban 4001
 P O Box 6148 Durban 4000
 TEL: 031 374 7200 FAX: 031 374 7201
 FSP License No. 6018

MOTOR THEFT CLAIM FORM

Insured	Policy Number				
	Name				
	Identity No.				
	Occupation				
	Address / Tel				
	Contact Person				
Vehicle	Make	Model	Year	Registration Number	
	Kilometres Completed		Date of Purchase		
	Anti-theft Device Details		Fitted by and Date		
	Window Marking Number		Done by Whom		
	Finance details (financier)		Account Number		
	Registered Owners Name:		Was the Vehicle Locked:		
Theft Details	Date	Time	Place		
	Vehicle and Accessories Stolen		Accessories Only		
	Details of Stolen Accessories (attach invoices)				
	Police Station		Reference Number		
	Circumstances of theft				
Identification	Chassis Number		Exterior Colour		
	Engine Number		Interior Colour		
	Details of Scratches, Dents, Defects etc.				
	Details of Personal / Hidden Identification Marks				
	Details of other features that would assist with identification				
	Who is in possession of the keys?				
Declaration	I / We hereby declare the foregoing particulars to be true in every respect and that no information has been withheld.				
	Signature of driver		Signature of Insured		
	Date		Date		