

A member of the (LIBERTY Group

The Heritage Insurance Company Kenya Limited

CfC House, Mamlaka Road

P.O BOX 30390 - 00100, Nairobi, Kenya (t) 254 20 278 3000 (f) 254 20 272 7800

(m) 0711 039 000, 0734 101 000

(e) info@heritage.co.ke (w) www.heritageinsurance.co.ke

Branches: Mombasa . Eldoret . Naivasha . Nanyuki . Nakuru

CLAIM FORM FOR WINDSCREEN / WINDOW DAMAGE								
POLICY NO.								
SE(1. 2.	Full Name of Insured Contact Details: (tel): ID NO:				(web): PIN NO:			
	(email):					6 ()		,
	(postal):	:		(code):		(town/ city):		
SE0 3. 4. 5.	Motor Vehicle Reg. No. Body Replacement Cost: Kshs.			Make and	d Model:		1000000	0000000
6.	Name of Garage				00000			
7.	Date of Incident				Place			
8.	Name of Driver of Vehicle							
9.	Description of incident and damage: Where can Vehicle be inspected ? Give details and address if necessary.							
10.	where can vehicle be hispecte	ed? Give details		in necessary.				
11.	Has any damage been caused If so, please provide details of		other than th	e breakage of the	e Windscree	n / Window ?	Yes	No
DECLARATION I/We hereby declare that the whole of the statement made by me/us in this Form of Claim are in every respect true, and I/we agree that if I/we have made any false or untrue statement or statements, or if there be any suppression or concealment of any material fact, my/our right to recover under the Policy shall be absolutely forfeited.								
Dat	te :		Signa	ture (Rubber stamp	if corporate)			

Important Notice

The cover afforded under the Windscreen extension endorsement has been exhausted by the claim but can be reinstated on payment of the appropriate premium. If you require the cover to be reinstated please write to us giving us your instructions