



Cross Country Insurance Consultants (Pty) Ltd Underwritten by Renasa Insurance Company Limited Cross Country is an Authorised Financial Services Provider 39547 Registration Number: 2008/013847/07 | VAT Number: 4020252203

Tel No: 011 215 8800 | Fax No: 011 476 8205 | website: www.ccic.co.za

Number

Tel No

		МО		CYCLE A									
Company/Surname:								Initials			Title	 T	
Policy Number					ID No)				VAT Reg.	. No		
Telephone (H)					(W)					Celll Pho	ne		
					ADDR	- 22							
Postal					ADDK	LJJ			Po	ostal Co	de		
Residential	Postal Code												
Residential										23101 00			
					LOS	S							
Place of loss								Т				 	
Date of loss								Time of L	OSS			 	
				INSURE	D MO	ORCY	CLE						
Make						∕lodel							
Year					Е	ingine	Numb	er					
Chassis Number/VIN No								lumber					
Date of Purchase					F	rice Po	aid						
Kilometers completed													
Registered Owner										'			
Where can the vehicle be inspected?													
Estimate for repairs (attach quote)													
Finance Company (if any)													
Type of Agreement					A	Accour	nt Nun	nber					
State name, address and account number of													
Finance Company													
				DRI	IVER D	ETAIL							
Surname	<u> </u>							Innitials			Title		
ID No	ـــــــ												
Address	 											 	
Contact Number												 	
				ΟŢ	HER P	ARTY							
Other Vehicles	Yes	No											
Name of Driver	1	1 1		Cor	ntact N	40			R	eaistrati	on		

PROPERTY OTHER THAN VEHICLE

Name of Owner

Detail of Damage

Address

		INJURED PERSON							
1. Name		INJUNED I EKSON	Tel. No						
Address			TOI. INC						
2. Name			Tel No						
Address									
1 1		WITNESSES	T 133						
1. Name		Tel No							
2. Name			Tel No						
POLICE DETAILS									
Name of Police/Traffic office	Name of Police/Traffic officer who Recorded details of accident								
Police station, case number	and date report	ed							
Was driver tested for alcohol	or drugs ?								
ACCIDENT DETAILS									
Speed before Accident	(KPH)	Speed on Imp	act (KPH)						
Description of Accident	(Kitt) Speed of impact (Kitt)								
Description of Accident									
		Sketch of incident							
For what purpose was the Motorcycle being used									
		BANK DETAILS							
		licence and it is free of endor	sements/endorsed as shown						
Method of Payment	Direct to Acco	ount Cheque							
Account details if payment is done directly to account									
	done directly to	o account							
Account Holder	done directly to								
Account Holder Account Number		Bank Branch							
Account Holder	s done directly to	Bank Branch	unt						
Account Holder Account Number		Bank Branch ccount Savings Accou	unt						
Account Holder Account Number Current Account	Transmission Ad	Bank Branch ccount Savings Accou							
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N.B. Please notify the Insurers should you become aware of any impending prosecution, inquest or defraud