



Insurance. Motor theft and/or hijack.

Insured Details:

Full name:		ID no.:
Address:		Policy no.:
Tel. no. (daytime land line):	Cell no.:	E-mail:
Occupation:	Driver's licence no.:	Issue date:
Code (full or learner):	Place of issue:	
Details of any criminal convictions:		

Driver/driver's licence hijack:

Full name:		ID no.:
Address:		Policy no.:
Tel. no. (daytime land line):	Cell no.:	E-mail:
Driver's licence no.	Issue date:	Licence issued at (place):
Code (full or learner):	Was he/she in your employment?	Y N Was he/she driving with your permission? Y N

State fully the purpose for which the vehicle was being used:

Details of any criminal convictions:

Details of previous claims:

Vehicle:

Year	Make and model	Registration	VIN no.	Engine no.
Exterior colour	Estimated odometer reading	Vehicle value	Finance company	Account no.
Is account in arrears?	Y N	Amount of keys issued on day of purchase:		
Any spare keys ordered?	Y N	If so, how many?		

Theft/hijack incident details:

Date of incident:	Time:	Place:	Date reported:
Reported by:	Name of police officer who recorded details of incident:		
Police station name:	Police reference:		

If not reported within 48 hours, state reason:

Description of the incident:

Declaration:

I/We hereby declare the foregoing particulars to be true in every respect. I/We authorise LGI Consultants CC (a duly authorised agent of Guardrisk), to obtain any incriminating information in my name held by the South African Police Service for insurance verification purposes.

I/We furthermore authorise the South African Police Service to furnish any possible convictions and/or any relevant information as is usually furnished by the Criminal Record Centre Of the South African Police Service.

Signature of driver Signed on DD / MM / YYYY Signature of insured Signed on DD / MM / YYYY