

Goods in Transit Claim Form



Policy No.: _____

DETAILS OF THE BROKER

Brokerage: _____ Telephone: _____

Contact Name: _____ Cellphone: _____

Agency Code: _____ Email: _____

DETAILS OF THE INSURED

Company Name / Insured: _____

Insured Telephone Number: _____ Insured Cellphone Number: _____

Physical Business Address: _____

Postal Code: _____

DETAILS OF LOSS

Date of loss / damage: _____ Time: _____ am pm

Description of goods concerned: _____

No. of packages: _____ Total weight: _____

If goods were part only of consignment, describe nature of other goods and value: _____

Address from which goods were despatched: _____

Code: _____

Date despatched: _____ Time: _____ am pm

Circumstances of loss or damage: _____

Registration no. of vehicle involved: _____ Make and type of vehicle: _____

Was matter reported to police?: _____ Details of officer/station: _____

Underwritten by:



Old Mutual Insure Limited is a licensed FSP and Non-Life Insurer.

Date advised: _____ Case no.: _____

If another vehicle was involved:

Owner's name: _____ Insurer's name: _____

Owner's address: _____ Insurer's address: _____

Name and address of witness(es): _____

IF YOU ARE THE OWNER OF THE GOODS, PLEASE COMPLETE THIS SECTION

How, and by whom were the goods transported? _____

Have you advised them of the loss or damage? Yes No Date advised: _____

Name and address of their insurers: _____

_____ Code: _____

PARTICULARS OF GOODS LOST OR DAMAGED

Quantity:	Description:	Value:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total: _____

Name and address of their insurers: _____

_____ Code: _____

DECLARATION

The information and answers given above are true in every detail and no information has been withheld.

Name: _____ Designation: _____

Signature: _____ Date: _____

DOCUMENT CHECK LIST

Documents to Submit with all GIT Claims	Yes	No
Completed claim form		
Driver statement or details of the circumstance of the accident/loss		
Load confirmation		
Waybills		
Supplier invoices (<i>invoice between the owner and his client</i>)		
Final priced claim against your company		
Contract of carriage (<i>between the owner and his client</i>)		
Police case number and station reported to		
COF on truck (<i>Licence and Roadworthy Certificate</i>)		
COF/s trailers (<i>Licence and Roadworthy Certificate</i>)		
Drivers ID or passport (<i>applies to SA and Foreign National</i>)		
Driver licence PrDP (<i>applies to SA and Foreign National</i>)		
Swaziland public driving permit (<i>applies to Swaziland Driver</i>)		
Zimbabwe defensive driving certificate (<i>applies to Zimbabwe Drivers</i>)		
International driving permit (<i>applies to all Zimbabwe/Swaziland Driver</i>)		