1. THIS IS WHAT THE COMPLETED FIRST PAGE WILL LOOK LIKE BEFORE YOU SUBMIT

Claim	Claim Service Providers		Report	Letters	Costing	Glass	Car Hire	Salvage	Third Party	Attachments	Notes	Es	stimates	Authorise Payments								
Glass Claim - Insurer Details																						
Insurer		RENASA	INSURANCE	COMPANY L	.IMITED				~	SP Clai	imNo		(New Claim)	*No SPM number*								
Broker	ĺ	Smit & Kie											rgt41134									
Refer to Email	ĺ	yolanda@	smitk.co.za							Insurer	r ClaimNo		LOUWE001-0011 TEST									
Branch		Smit & Kie							~		Specialist		Yolanda du T	~								
Claim Status		Pending							~		Specialist Contac	t No	015 307 5587									
Claim Sub Status									~	Calif	opecialist contac	. 110										
Scheme		Domestic	Policy V							Natura	l Doril		no V Nat	tural Perils List								
Scrience		Domestic	rolley ¥										no V Natural Perils List									
10200			220000							CAT Co												
Claim Type		Domestic -	Motor							Rap Pri	icing											
Client Details																						
		LOUBALAN									500 S		0005000045									
Insured Telephone No 1		LOUW MR EJ									none No 2		0835302645 81042253160									
Risk Address Po		0835302645 Code 0885						ID Nur	ilibei		0 1042233 100	004										
NSK AUDIESS FUSIC CODE VOUS																						
										Vehicle Detai	ils											
Make		TOYOTA									0		AHTFZ29G509144444									
Model		HILUX 3.0	D-4D LEGE	ND 45 4X4 A	/T P/U D/C					Engine	e No		1KDA885337									
Year of Manufa	cture	2016								Loss b	etween (dd mm	уууу)	DD MM YYYY hh mm 05									
Vehicle Location	n	TZANEEN	V							and (d	ld mm yyyy) C	ору	05 08 2									
													STONE DAM	MAGE	1/4							
Province		Limpopo	~	1						Descrip	ption Of Loss											
															~							
												Г	BARIO EVOE	SS 25% MIN R350								
ype of Damage	٦	Stone							~	Excess(e	nn)		BASIC EXCE	55 25% MIN R350	^							
ype of Damage		none								LACESS(cs)				~							
ehicle Registratio	on No	KP578L										L	E									
10.518																						
										Where is Vehic	le											
					Home Addı	ess								Work Address								
Unit No, Co	omplex Name	13								1	Unit No, Comple											
	Street No. Street Name	245 AVENI	UE no 12									eet No. t Name										
		LETSITEL							Suburb													
	Postal Code											al Code										
Additional Details OGS Accepted By Not accepted																						
1000000			epted									+										
OGS	S Appointed N	10																				
Submit Cancel																						

2. THIS IS WHAT THE COMPLETED FIRST PAGE WILL LOOK LIKE AFTER YOU SUBMIT

<u>Claim</u> S	ervice Prov	viders	Report	Letters	Costing	Glass	Car Hire	Salvage	Third Party	Attach	nments	Notes	Estimates	Authorise P	ayments						17
Glass Claim - Insurer Details																					
Insurer		RENASA	INSURANCE	COMPANY L	IMITED				~	esternamental in the	SP ClaimNo		SPM 42466	61/10/18	low vol	u have th	e claim i	number			
Broker		Smit & Kie									Policy No		rgt41134		NOW YOU	u nave tn	e ciaiiii i	Hullibei			
Refer to Email		yolanda@smitk.co.za										mNo	LOUWE00	LOUWE001-0011 TEST							
Branch		Smit & Kie							~		Claim Specia		-	Yolanda du Toit							
Claim Status		Pending							~			alist Contact N									
Claim Sub Status									~												
Scheme		Domestic Policy V										ı	no V N	Natural Perils Li							
			,	ı							Natural Peril CAT Code										
Claim Type Domestic - Motor											Rap Pricing 0.0000										
											ent Details										
Insured		LOUW MF	R EJ								Telephone N	No 2	083530264	45							_
Telephone No 1		08353026									ID Number		810422531								-
Risk Address Post C		0885											010422331	10004							
		/																			
										Vehicle	e Details										
Make		TOYOTA									VIN No		AHTFZ29G	AHTFZ29G509144444							
Model		HILUX 3.0 D-4D LEGEND 45 4X4 A/T P/U D/C									Engine No	2 Victoria - Control - Con									
Year of Manufactur	e	2016									Loss betwee	tween (dd mm yyyy) DD MM YYYY hh mm									
Vehicle Location		TZANEEN	I								and (dd mm	гуууу) Сору	5 8 2018 12 30								
													STONE DA	AMAGE							
Province		Limpopo	~	ĺ							Description	Description Of Loss									^
Frovince	2	Limpopo	•	Į.							Description	OI LUSS									<u></u>
													8								
												BASIC EX	XCESS 25% MI	N R350							
Type of Damage		Stone							~		Excess(es)										
																					~
Vehicle Registration No DKP578L																					
Where is Vehicle																					
Home Address														Work Addr	PEE						
Unit No, Cor	molex Nam	e 13								7	Unit	t No, Complex	Name								4
Street No. 13											J		et No.								
Street Name 2th AVENUE no 13												Street									
Suburb LETSITELE													uburb								
Postal Code 0885												Posta									
										Addition	nal Details										
OGS A	ccepted By																				
OGS Appointed NO																					