

ONE Financial Services Holdings (Pty) Limited Reg no: 1998/005199/07 is a juristic representative of: One Commercial Motor and Liability (Pty) Ltd. FSP: 8783 One Commercial Securities (Pty) Ltd. FSP: 20395 Underwritten by Absa Insurance Risk Management Services Ltd. and Absa Insurance Company Ltd.

Tel: 0861 266 562 Address: 54 Maxwell Drive, Woodmead North Office Park, Woodmead, Johannesburg

Postal address: Postnet Suite 221, Private Bag X75, Bryanston, 2021 Web: www.one.za.com

PUBLIC LIABILITY CLAIM FORM

Policyholder Details

Insurer					
Insured			Policy Number		
Telephone	Home	Work		Cell	

Broker Details

Broker Name				
Contact	Tel	Fax	E-mail	

Details of Loss /Damage

Date of Loss	Time of Loss: Please indicate am/pm
Description of Loss	
	Estimated Amount of Loss

Incident

Place where incident occurred	

Witness Details

Name			
Address			
Telephone	Home	Work	Cell

Police

If reported to police, state which station	
Reference Number	

Details of Property Damage

Name of owner		
Address of owner		
Description of loss or damage		

PUBLIC LIABILITY CLAIM FORM

Details of Personal Injuries

Name					
Address					
Telephone	Home	Work		Cell	
Age of injured		Details	of injuries		

Relationship Details

If any person named above is in your service, or your tenant, or related to you, give full details							
Name							
Address	ddress						
Telephone	ephone Home Cell						

Claim

If a claim has been, or is being made against you, give details and attach any correspondence						
Name						
Address	Address					
Telephone	lephone Home Cell					

Description of incident	Describe exactly how the incident occurred

_____20____

Declaration

I hereby declare the foregoing particula	rs to be true in every	respect.
Signed at	_on this	_day of

Name:	_Witnessed By:
Capacity:	

Signature:______Tel:______