



Claims Procedure - Motor Claims

- Please make sure to use a towing service that is approved by your insurance company. Feel free to contact the Helpline provided by your Ben Sure Consultants Representative.
- If there is a 3rd party (another vehicle) involved in the accident, make sure you receive all the contact information, vehicle details and insurance details of the 3rd party.
- Report the accident to the police within 24 hours of the accident. The accident report number is extremely important for your claim.
- Provide us with a quotation, to repair your vehicle, by any approved panel beater.
- Complete the claim form and send to info@bensure.com accompanied by a copy of your ID, copy of the driver's license of the driver at the time of loss, the quotation for the repairs, a sketch of the accident and the police reference number.
- After your signed claim form has been received, our claims department will contact you within 24 hours regarding further procedures.

Feel free to contact us at 012x6632056 or email info@bensure.com for any assistance you might need regarding your Motor Claim.



benSureconsultants
Its the quality that counts

Motor Claim Form

Insured	Insurer:		Policy No:		
	Name:		Occupation:		
	Tel No:		ID No:		
	Address:				
	Bank:	Account No:	Branch:		
Vehicle	Make:	KM's:	Registration:		
	Make & Model:	Value:	Date of Purchase:		
	If vehicle subject to Hire Purchase, Credit or Leasing agreement, state name and address of Finance co:				
	In Who's name is Vehicle registered?:				
Damage	Damage to own vehicle:				
	Estimate for repairs or attach quotation:				
	Repairers name, address and telephone no:				
	Where can your damaged vehicle be inspected?:				
Driver	Full Name:		Occupation:		
	Address:				
	Driving License No:	Full / Learner:	Place:		
			Code:	Date:	
	State fully the purpose for which the vehicle was being used:				
	Was he/she driving with your permission?:				
	Is he/she the owner of another vehicle?: If yes, give name of insurer and policy no:				
	Details of any convictions for motoring offenses:				
	Has license ever been endorsed?:				
Has he/she any physical defects?:					
Details of previous accidents:					
Passenger	Passengers in insured vehicle	Name	Address	Injury	
	For what purpose were they carried?:		Are they Employees?:		
Other Party	Other Vehicles	Registration	Make	Name and address of driver	Detail of damage

Other Party	Property other than vehicles	Name and address of owner		Details of damage		
	Personal Injuries (Other than in insured vehicle)	Name of Injured	Relationship to accident e.g. Driver, Passenger ect	Details of Injuries	Name of Hospital if applicable:	
Accident	Name, Address and Place:					
	Date, Time and Place:					
	Speed		Before Accident (KPH) :	After Accident (KPH):		
	a) Weather Conditions		a)	b)		
	b) Visibility		a)	b)		
	a) Road Surface		a)	b)		
	b) Width of Road		a)	b)		
	a) Which vehicle lights were on		a)	b)		
	b) Street Lighting		a)	b)		
	Was any warning given by you e.g. hooting, indicator?:					
	Police Details:		Name of Police/Traffic Officer who recorded the details of accident:			
			Police Station and Reference No:			
	Was the driver tested for alcohol or drugs?					
	Description of Accident:					
Sketch of Accident (If necessary use separate page)		Please show the point of impact and indicate the direction of travel by arrows. Give details of any road safety signs or warning signs in vicinity of scene or accident				
Authority Payment	It is recommended that any amount payable to you direct be transmitted by Electronic Bank Transfer for speedier settlement and security reasons. If you are agreeable to this, please provide the following information.					
	Name of Bank:		Branch and code:		Acc No:	
	Name of account holder:			Your signature		
I have inspected the drivers license and it is free of endorsements as shown						
Signature:			Capacity:			
We hereby declare the foregoing to be true in every respect:						
Signature of Driver:			Date:			
Signature of Insured:			Capacity			
NB: It is important that you notify the insurers immediately you become aware of any impending prosecution inquest of demand						