



RENASA
INSURANCE COMPANY LIMITED

MOTORONGELUK EISVORM					MOTOR ACCIDENT CLAIM FORM		
Skrap afdelings nie van toepassing					Delete sections not applicable		
MVA VERSEKERAAR		Polis Nr. Policy No.		Teken Nr. Token No.		MVA INSURER	
VER-SEKERDE	Naam en Beroep					Name and Occupation	
	Adres en Telefoon Nr.					Address and Phone No.	
VOERTUIG	Indien voertuig onder Huurkoop, Kredit of Bruikhuurooreenkoms is meld naam en adres van Finansieringsmaatskappy	Soort/Make	Tara/Tare	Bruto Voertuig Massa/ Gross Vehicle Mass	Kilometers afgelê/Kilometres completed		If vehicle subject to Hire Purchase, Credit or Leasing Agreement, state name and address of Finance Company
		Registrasie/ Registration	Waarde/ Value	Model en Jaar/ Model and Year	Datum van aankoop en bedrag betaal/ Date of purchase and price paid		
	→					←	
SKADE	Skade aan u eie voertuig					Damage to own vehicle	
	Prysopgawe vir die herstelwerk of heg kwotasie aan					Estimate for repairs or attach quotation	
	Hersteller se naam, adres en telefoonnommer					Repairer's name, address and telephone number	
	Waar kan u beskadigde voertuig ondersoek word?					Where can your damaged vehicle be inspected?	
BESTUURDER	Volle Naam					Full Name	
	Adres					Address	
	Beroep en Geboortedatum					Occupation and Date of Birth	
	Rybewys	Nommer/Number	Datum/Date	Plek/Place	Telefoon Nr. Telephone No. Kode/Code	Vol/Full Leerling/Learner	Driving License
	Meld volledig die doel waarvoor die voertuig gebruik is					State fully the purpose for which the vehicle was being used	
	Het hy/sy met u toestemming bestuur?					Was he/she driving with your permission?	
	Was hy/sy in u diens?					Was he/she in your employ?	
	Het hy/sy versekering op sy eie voertuig? Indien ja, meld Polismommer en Maatskappy					Has he/she any motor insurance on own car? If yes, state Policy Number and Company	
	Is rybewys ooit geëndosseer?					Has license ever been endorsed?	
	Ly hy/sy aan enige liggaamlike gebreke?					Has he/she any physical defects?	
(a) Besonderhede van enige veroordeling weens motor oortredings					(a) Details of any convictions for motoring offences		
(b) Besonderhede van vorige ongelukke en verliese					(b) Details of previous accidents and losses		

PASSASIERE (VERSEKERDE VOERTUIG)	Passasiers in versekerde voertuig		Naam/Name		Adres/Address		Besering/Injury		Passengers in insured vehicle		PASSENGER (INSURED VEHICLE)			
	Vir watter doel is hulle vervoer?								For what purposes were they carried?					
Is hulle werknemers?								Are they employees?		OTHER PARTY				
ANDER PARTY	Skade aan ander voertuie		Registrasie Nr. Registration Mo.		Soort Make		Naam en adres van Eienaar en Bestuurder Name and address of Owner and Driver		Besonderhede van skade Details of damage		Damage to other vehicles			
Skade aan eiendom uitgesonderd voertuie		Naam en Adres van Eienaar Name and Address of Owner				Besonderhede van Skade Details of Damage				Damage to property other than vehicles				
Persoonlike beserings (uitgesonderd die in versekerde voertuig)		Naam van Beseerder Name of Injured		Verband met die ongeluk bv. Bestuurder, Passasier ens. Relationship to accident eg. Driver, Passenger etc.		Besonderhede van Besedings Details of Injuries		Naam van Hospitaal indien van toepassing Name of Hospital if applicable		Personal injuries (other than in insured vehicle)				
GETUIES	Naam, Adres en Tel Nr.								Name, Address and Tel No.		WITNESSES			
	Naam, Adres en Tel Nr.								Name, Address and Tel No.					
ONGELUK	Datum, Tyd, Plek								Date, Time, Place		ACCIDENT			
	Spoed:		Voor ongeluk Before accident			kpu kph		Oomblik van botsing Moment of impact		kpu kph		Speed:		
	(a) Weersomstandighede (b) Sigbaarheid		a)				b)					(a) Weather conditions (b) Visibility		
	(a) Padoppervlakte (b) Breedte van pad		a)				b)					(a) Road surface (b) Width of road		
	(a) Watter voertuigligte van aan? (b) Straatbeligting		a)				b)					(a) Which vehicle lights were on? (b) Street lighting		
	Is enige waarskuwing deur u gegee? b.v. toet, flikkering ens.								Was any warning given by you? e.g. hooting, indication etc.					
	Polisie Besonderhede		Naam van Polisie/Verkeersamptenaar wat besonderhede van ongeluk geneem het/Name of Police/Traffic Officer who recorded details of accident				Polisiestasie en verwysing nommer Police Station and reference number					Police Details		
	Was bestuurder getoets vir Alkohol of Dwelmmiddels?								Was driver tested for Alcohol or Drugs?					
BESKRYWING VAN ONGELUK								DESCRIPTION OF ACCIDENT						

ONGELUK	<p>SKETS VAN ONGELUK (Indien nodig heg aparte sketsplan aan)</p>	<p>Dui asseblief die plek van botsing duidelik aan en gebruik pyltjies om die rigting waarin gerues is, aan te toon. Gee besonderhede van enige padveiligheidstekens in die omgewing van die ongelukstoneel.</p>	<p>Please show clearly 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 of accident.</p>	<p>SKETCH OF ACCIDENT (If necessary use separate page)</p>	ACCIDENT
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VERKLARING	<p>“I acknowledge that the sharing of insurance information for underwriting and claims purposes (including credit information) between insurers is in the public interest as it enables insurers to underwrite policies and assess risks fairly and to reduce the incidence of fraudulent claims with a view to limiting premiums. On my own behalf and on behalf of any person I represent herein, I hereby waive my right to privacy with regard to underwriting or claims information (including credit information) that I provide or that is provided by another person on my behalf in respect of any insurance policy or claim made or lodged by me. I acknowledge that the insurance information provided by me may be stored in the shared database and used as set out above as well as for any decision pertaining to the continuance of my policy or the meeting of any claim I may submit. I consent to such information being disclosed to any other insurance company or its agent. I acknowledge that the information may be verified against legally recognized sources or databases.”</p> <p>Ons verklaar hiermee dat die voorafgaande in elke opsig waar is. We hereby declare the foregoing particulars to be true in every respect.</p> <p>Bestuurder se Handtekening _____ Datum _____ Signature of Driver Date</p> <p>Versekerde se Handtekening _____ Hoedanigheid _____ Datum _____ Signature of Insured Capacity Date</p> <p>L.W. DIT IS BELANGRIK DAT U DIE MAATSKAPPY ONMIDDELIK IN KENNIS STEL SODRA U BEWUS WORD VAN ENIGE VERVOLGING, NADOODSE ONDERSOEK OF EIS.</p> <p>N.B. IT IS IMPORTANT THAT YOU NOTIFY THE COMPANY IMMEDIATELY YOU BECOME AWARE OF ANY IMPENDING PROSECUTION, INQUEST OR CLAIM.</p>	DECLARATION
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