



FIRST INSURANCE COMPANY LIMITED

“Service Beyond Expectation”

A Subsidiary of NicozDiamond Insurance Limited, Zimbabwe

Plot No.1 Kyadondo Road
P.O.Box 5245, Kampala-Uganda
Email:fico@fico.co.ug
Website: www.fico.co.ug

WINDSCREEN GLASS (MOTOR) CLAIM FORM

The issue of this form is not to be taken as an admission of Liability

To help us deal with your claim as quickly as possible PLEASE ANSWER ALL QUESTIONS ON THE CLAIM FORM FULLY AND CLEARLY, and sign and date the form.

Name of Insured.....

Address.....

Email.....Telephone.....

Policy No.....Expiring on:.....

Make of vehicle.....Year of Manufacture.....

Registration No.....

Date of breakage.....Time.....Place.....

Cause of breakage.....

Estimated Cost of Repair/Replacement.....

Name and Address of the Driver.....

Driving Permit No.....Date of Expiry.....

State whether premium is paid in full and to whom?.....

Have you lodged any claim under this policy before? Yes.....No.....If Yes give details.....

Do you wish to reinstate the windscreen cover? Yes.....No.....

DECLARATION

I/ We the above named, do hereby to the best of my/ our knowledge and behalf, warrant the truth of the foregoing statements in every respect; and I/ We agree that if I/We have made, or in any further declaration to the company in respect of the said loss, shall make any false or fraudulent statement or any suppression or concealment my / our claim shall be absolutely forfeited and the Policy shall henceforth be null and void.

Date.....Insured’s Signature & Stamp

Name.....

PLEASE COMPLETE AND RETURN THE CLAIM FORM AND PROVIDE THE FOLLOWING

1. Copy of the log book.
2. Copy of the valid driver's permit (for accidental damage).
3. At least two repair/replacement quotations.

Note:

1. **For any claim to be registered, please ensure that your vehicle is brought to our offices for inspection and photographs of the damage taken by our claims staff.**
2. **Exaggeration of claim amount or deliberate submission of falsified/fraudulent documents will render your claim inadmissible for payment.**