# **CLAIM FORM**

## **IMPORTANT INFORMATION**

A claim cannot be entertained until ALL details are completed and relevant documents returned. All lost or stolen phones must be blacklisted before your claim can be attended to. Should a lost or stolen phone be recovered, it becomes the property of the Insurer.

**LEGAL NOTICE:** A person who knowingly presents a false or fraudulent insurance claim with the intent to injure, defraud or deceive any insurer is guilty of a crime and may be subject to fines and confinement in prison. When fraud is discovered, Techsured reserve the right to take appropriate action to stop such fraud and explore all of its available legal remedies.

Name and Surname						
Policy Number						
Identity Number						
Cellular Number						
Contact Number						
Email Address						
ASSET DETAILS						
Make						
Model						
Serial / IMEI Number						
_	REQUIRED IN CASE	OF THEFT, LOSS, DAMAGE OR UNLAWFUL USA	AGE OF SIM CARD			
Identity Document						
Completed Claim Form	ı					
Affidavit (In Case of Lo	ss or Theft)					
Blacklist Form (In Case	of Loss or Theft)	Download Blacklist Form				
DOCUMENTS REQUI	DOCUMENTS REQUIRED IN CASE OF A SUBSCRIBER AGREEMENT COVER CLAIM					
Death	A copy of the Death Certificate					
Permanent Disability	A letter from your medical practitioner and full proof of medical boarding					
Temporary Disability	A letter from your medical practitioner and a letter from your employer's HR Department					
Retrenchment	A copy of the retrenchment letter issued by your employer's HR Department					
OTHER INSURANCE						
Is the device covered by any other policy?						
Is the device covered b	y any guarantee?					
If "Yes" please provide details of cover.						



+27 (0)860 109 529 Fax: +27 (0)866 786 300 Email: support@techsured.co.za Web: www.techsured.co.za Address: The Centenary Building, 30 Meridian Drive, Umhlanga, 4319 Insured by:

Sandton, 2196

Guardrisk Insurance Company Limited An Authorised Financial Services Provider (FSP no 75) An Authorised Financial Services Provider (FSP no 42787) Registration Number 1992/001639/06 VAT Registration Number 425 013 8072

2nd Tower 102 Rivonia Road

Administered by:

30 Meridian Drive, Umhlanga, 4319

Viva Cover (Pty) Ltd Registration Number 2007/018990/07 VAT Registration Number 453 024 3569 The Centenary Building,

CLAIM TYPE
Loss
Theft
Disability
Retrenchment
CLAIM DETAILS
Date of Incident
Place of Incident
Police Case Number (In Case of Loss or Theft)
Date Reported (In Case of Loss or Theft)
ITC Reference (In Case of Loss or Theft)
FULL DESCRIPTION OF THE INCIDENT
IN CASE OF DAMAGE PLEASE PROVIDE A DESCRIPTION OF FAULT, FAILURE OR DAMAGE
IN CASE OF DAMAGE PLEASE CONFIRM YOUR COLLECTION ADDRESS
Street Name and Number
Suburb
City
Province Province
Postal Code



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#### IN CASE OF DAMAGE PLEASE CONFIRM

Device Password (Case Sensitive):				
	•	•	•	
Device Security Pattern:	•	•	•	
	•	•	•	

### **TECHSURED EXCESS STRUCTURE**

TECHSURED HANDSET EXCESS				
	Theft / Loss	Damage	<b>Unlawful Usage of SIM</b>	SAC
1 <sup>st</sup> Claim	R 350.00	R 150.00	Nil	R 300.00
2 <sup>nd</sup> Claim	R 650.00	R 250.00	Nil	
3 <sup>rd</sup> Claim	R 800.00	R 350.00	Nil	

#### Additional Excesses:

- Claim arising within 30 days of inception R 600.00
- Claim arising within 30 to 60 days of inception R 300.00

TECHSURED GADGET EXCESS				
	Theft / Loss	Damage	Unlawful Usage of SIM	SAC
1 <sup>st</sup> Claim	25% of value	25% of value	Nil	10% of value
2 <sup>nd</sup> Claim	30% of value	30% of value	Nil	
3 <sup>rd</sup> Claim	35% of value	35% of value	Nil	

### Additional Excesses:

- Claim arising within 30 days of inception 15% of the value of the claim
- Claim arising within 30 to 60 days of inception 10% of the value of the caim

### **DECLARATION**

I/We have procured insurance cover and agreed to the terms thereof with Viva Cover (Pty) Ltd and declare to the best of my / our knowledge that the above particulars are true and correct, and I / we undertake to render every assistance in my / our power to Viva Cover (Pty) Ltd in dealing with the matter. I / we hereby agree that Viva Cover (Pty) Ltd may take over and conduct the process for their own benefit of any claim for whatever reasons and shall have full discretion in the conduct thereof. I / we the undersigned hereby waive any rights of recourse that I / we may have against Viva Cover (Pty) Ltd relating to the disclosure of the abovemetioned information. Should any equipment be recovered after a claim for loss / theft has been submitted, this equipment shall become the property of Viva Cover (Pty) Ltd. If the equipment is deemed to be beyond economical repair by an approved repairer, all components such as the aerial, battery and charger must be submitted by the claimant. I / we hereby agree that Viva Cover (Pty) Ltd may debit my account for any premiums or excess amounts due.

<b>a</b> ) 1	
Signed:	Date:



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