



Plate glass claim form

Policy No.	
ID number/Reg Number	
Contact number	
Address where breakage occurred	
Date of breakage	
Size of glass	
Description of broken glass	
Position of glass (house, shop door, fanlight, show case etc.)	
Cause of breakage	
Is the person responsible for glass breakage identifiable	
Name of person responsible	
Address	
Witnesses	Name: _____ Contact: _____

Whether cracked or smashed _____ please indicate in sketch below.

Estimated salvage _____

Policyholders Are reminded that all salvage must be presented.

I declare the foregoing particulars to be true and correct and undertake to render every assistance in my power in dealing with this matter.

Signature _____ Date _____