



Windscreen Damage Claim Form

Policy No.:	
Insured:	
Address:	
Occupation:	
Telephone No.(s):	
Driver details:	
Vehicle make:	
Model:	
Year:	
Registration:	
Date of loss:	
State how breakage occurred:	
Glass damage:	
Glazier:	

I/We declare the foregoing particulars to be true in every respect.

Date: _____

Signed: _____

Westwood Insurance Brokers (Pty) Ltd. An Authorised Financial Services Provider

Chairman: A.M. Coughtrie | Managing Director: A.M. Naidoo | Directors: C. Coughtrie , K. Naidoo

Reg. No.: 2010/015468/07 | VAT No.: 4790255394 | FSP No.: 16726 | BBBEE Status: Level 1

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