



CONSORT

TECHNICAL UNDERWRITERS



TRUSTED ENGINEERING INSURANCE

Machinery Breakdown (MB) Insurance incl. Business Interruption

Claim Form

Notes:

- a) The acceptance of this form is not in itself and admission of liability
- b) Please complete all questions and return immediately
- c) Preserve all damaged parts and make them available for inspection if required
- d) Additional information may be required



Broker / Agent Information

Broker Name: FAIS No:

Branch Name:

Consort Agency Number:

Broker Contact Person:

Tel No: Fax No: E-mail Address:

Insured Information

Proposer Name:

Type of Business:

Postal Address: Physical Address:

Postal Code: Postal Code:

Contact Person:

Tel No: Fax No: Cell No:

E-mail Address:

Insurance

Insurance Company: Lombard Insurance Company Limited

Policy Number:

Policy Holder:

Details of Damage

Date:

Time (e.g 12:00 PM):

Place:

Explain exactly how the loss occurred:

List of equipment damaged	Item No. of Machinery on Policy Schedule	Estimated Cost of Repairs	Value of salvage	Amount claimed after allowing for depreciation though wear and tear and deduction value of salvage

Have you ever lodged an insurance claim? Yes No

If yes, please provide details:

Is there any other insurance policy covering this loss/damage? Yes No

If yes, please provide details:

Business Interruption

Where the machinery is also insured against Business Interruption (Loss of Profits), please indicate:

a) Estimated downtime:

b) Any alternative means of working:

Supporting documentation required:

- ❖ quotations for cost / repair replacement
- ❖ photographic evidence of damage
- ❖ original purchase invoice
- ❖ where a financial institution's interests are noted, confirmation of outstanding settlement

Disclosure

We hereby declare that the above statements made by us are, to the best of our knowledge and belief, complete and true. It is agreed that the Company is liable in accordance with the terms of the Policy only. The Company undertakes to treat this information in strict confidence.

Date:		Name of authorised signature:	
		Capacity:	

* Please note that for this document to be deemed authentic, it must be sent from a nameserver (e.g. person@yourcompany.co.za) and not a web based e-mail service.

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Consort Technical Underwriting Managers (Pty) Ltd is an Authorised Financial Service Provider. FSP No. 2273

