CONSORT

General (Non-specific) Insurance

31

28

0

2

Claim Form

IMPORTANT NOTICE

We hereby disclose that the statements made by us in this Questionnaire and Proposal are, to the best of our knowledge and belief, complete and true, and we hereby agree that this information forms the basis and is part of any policy issued in connection with the above risk. 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.

The Parties acknowledge that for the purposes of performing this contract it will be necessary to process the

Proposer's private information including making that information available to other associated parties, insurers or reinsurers. In addition the Proposer consents to the transfer of that information to the reinsurers even if those reinsurers are situated outside the Republic of South Africa for use in connection with the performance of this contract and any related reinsurance contract.





CONTACT US +27 (11) 658 1156 | info@consort.co.za | www.consort.co.za COMPANY REGISTRATION NUMBER 1999/003909/07