



<b>INSURED</b>	POLICY NO.:				
	NAME & OCCUPATION:				
	ADDRESS:				
	DAY TEL. NO.				
<b>OCCURRENCE</b>	Date of breakage:			Time of breakage:	
	Cause of breakage:				
	Name & address of person responsible for breakage:				
	Names of witnesses:				
<b>PREMISES</b>	Address of premises where breakage occurred:				
	Were premises occupied:			If so, by whom:	
	Purpose for which occupied:				
<b>VEHICLE</b>	Make:			Registration:	
	Model:			Year:	
	Windscreen Tinted:			Windscreen Clear:	
	Windscreen Shatterproof:			Windscreen Armour Plated:	
	Driver's Name:			Driver's Licence No.	
	Place of issue:			Date of issue:	
<b>DETAILS OF BROKEN GLASS</b>	Full description of broken glass:				
	Size & thickness in millimetres:				
	Cracked or Shatterproof:			Any sign writing on broken glass:	
<b>VALUE</b>	Total value of all insured glass:			When last valued:	
<b>OTHER INSURANCE</b>	Is there any other insurance covering the broken glass:				
	If yes, give name of insurer:				
<b>DECLARATION</b>	<b>We solemnly declare that the above particulars are true in every aspect</b>				
	Insured's signature:		Capacity:		Date:

We may use your information or obtain information about you for the following purposes:

- Underwriting
- Assessment and processing of claims
- Credit searches and/or verification of personal information
- Claims checks (ASISA Life & Claims Register)
- Tracing beneficiaries
- Fraud prevention and detection
- Market research and statistical analysis
- Audit & record keeping purposes
- Compliance with legal & regulatory requirements
- Verifying your identity
- Sharing information with service providers we engage to process such information on our behalf or who render services to us. These service providers may be abroad, but we will not share your information with them unless we are satisfied that they have adequate security measures in place to protect your personal information.

You may access your personal information that we hold and may also request us to correct any errors or to delete this information. In certain cases you have the right to object to the processing of your personal information.

You also have the right to complain to the Information Regulator, whose contact details are:

<http://www.justice.gov.za/infoereg/index.html>

Tel: 012 406 4818

Fax: 086 500 3351

Email: [infoereg@justice.gov.za](mailto:infoereg@justice.gov.za)