

WINDSCREEN CLAIM FORM

1. Insured:.....
2. Address:
3. Policy No.
4. Reg. No.:.....
5. Make & Type:.....
6. Date on which damage occurred:.....
7. Name of driver of vehicle:.....
8. Description of incident and damage:.....
.....
.....
9. Is replacement of windscreen same type as broken one:.....
10. Was any damage caused to the vehicle other than breakage of the
windscreen / window glass?.....

I do hereby warrant the truth of the answers and particulars given on this form and that I have withheld no material information and I hereby claim for the damage as set out on this form hereto, amounting in all to Shs.....

Date thisday of20.....

Signature of Insured:.....

British-American
Insurance Co.
(Kenya) Ltd.

Britak Centre
Mara and Ragati
Roads.

P.O. Box 30375,
00100 G.P.O.
Nairobi, Kenya.

Telephone:
2710927/38
0722 205506
0733 687083

Telefax:
2717626

E-mail:
britak@britak.co.ke

Website:
www.britak.co.ke