

## 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 this .....day of .....20.....

Signature of Insured:.....

British-American  
Insurance Co.  
(Kenya) Ltd.

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Mara and Ragati  
Roads.

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