



HANDSET INSURANCE CLAIM FORM

Theft

Lost

Damage

Cellular Number:	0																					
Account Number:																						
Contact Number:											Fax Number:											
User Name:											User ID Number:											
E-mail Address:																						
Account Holder:																						
Cellular Phone:	Make :											Model :										
Phone Serial No:*																						

*15 digit number on the back of the phone visible when the battery is removed or on packaging of the phone.

Date last used _____/_____/_____	Date of Incident _____/_____/_____
<u>Full Description of Incident</u>	
<p>EXCESS: Lost or stolen or Un-repairable phone. I agree to pay the applicable excess of:</p> <p>a) 1st Claim Excess R350.00 b) 2nd Claim Excess R750.00 within a 12 months period c) 3rd Claim Excess R1000.00 within a 12 months period</p> <p>In respect of any claim occurring within 60 days of the inception date, an additional excess of R300.00 will be applicable</p> <p>EXCESS: Repairable. I agree to pay the applicable excess of:</p> <p>a) 1st Claim Excess R150.00 b) 2nd Claim Excess R300.00 within a 12 months period c) 3rd Claim Excess R350.00 within a 12 months period</p> <p>In respect of any claim occurring within 60 days of the inception date, an additional excess of R300.00 will be applicable</p>	

FOR REPAIRS TO BE AFFECTED, THE PHONE MUST BE HANDED INTO A MTN SERVICE PROVIDER SERVICE CENTRE

For Theft / Loss:

Police Station: _____
Tel No: _____
Case No: _____
Date Reported: _____/_____/_____

Date Reported to MTN SERVICE PROVIDER ___/___/___

Note: No claim for theft from a vehicle / premises will be accepted without evidence of forcible entry in the form of an approved repair invoice to be submitted with this claim form.



DECLARATION

I/ We declare to the best of my/ our knowledge and belief that the above particulars are true and correct, and I/ we undertake to render MTN SERVICE PROVIDER every assistance in my/ our power in dealing with the matter. I/ We hereby agree that MTN SERVICE PROVIDER may take over and conduct the prosecution for their own benefit of any claim for indemnity or otherwise and shall have full discretion in the conduct thereof. I the undersigned hereby waive any rights of recourse that I may have against MTN SERVICE PROVIDER relating to the disclosure of the above mentioned information. Should any equipment be recovered after a claim has been submitted, this equipment becomes the property of MTN SERVICE PROVIDER (PTY) LTD Insurance Department.

If the phone is deemed to be beyond economical repair by an approved Repairer, all components such the aerial and battery and charger must be submitted by the claimant.

Claimant Signature: _____

Date: _____

PLEASE NOTE: This claim will take approximately 24 hours when this application is 100% complete, with all information verified.

MTN Service Provider is an Authorised Financial Service Provider