



GENERAL INSURANCE Company Limited

19-21 Knutsford Boulevard, P.O. Box 514, Kingston 5, Jamaica, West Indies.

Toll Free: 1-888-429-5GKG (429-5454), E-Mail: gkginfo@gkco.com, Website: www.gkgeneral.com

PLEASE ANSWER EVERY QUESTION

Name of Company: _____ Branch: _____ Policy No.: _____

Name of Insured _____ Tel. No. _____

Address where breakage occurred _____

Business _____

Date of breakage _____

Size of glass _____

Type of glass (if not plate) _____

If glass is ornamented, state details _____

Situation of glass (whether in window, door, show-case, etc.) _____

How did breakage occur? _____

Was breakage caused by Insured, member of family or staff? _____

If not, state name and address of person causing breakage _____

Was glass cracked or smashed by the happening? _____

Was glass sound previous to breakage? _____

Do you require re-glazing to be deferred until further notice? _____

I hereby warrant the truth of the foregoing statements.

Signature _____

Date _____