



**NICO
General**

associated with  **Sanlam** group

NICO HOUSE, NICO HOUSE, P.O Box 2592, Blantyre; Tel: 01 822699; Fax: 01 822363
NICO CENTRE, P O Box 30421, Capital City, Lilongwe 3; Tel: 01 751366; Fax: 01 751365
MPICO HOUSE, P.O. Box 226, Mzuzu; Tel: 01 312876; Fax: 01 312564
Email: info@nicogeneral.com Website: www.nicogeneral.com

CLAIMS DECLARATION

CLAIM NO.: _____ POLICY NO.: _____

Date of Loss: _____

I (full name in block letters) _____

of P.O. Box _____ hereby confirm the truth of the following

statements which I have made so that my claim be dealt with expeditiously by the Nico General Insurance Company Limited (herewith referred to as "the Company").

1. I suffered a _____ at my house / shop / office

Situated Plot No. _____ at approximately _____

On _____

2. This occurrence was reported by _____

to _____ Police Station at _____

on _____. The Officer to whom the matter was reported was

3. The items and value listed on the claim form submitted to the Company correspond to those which were reported as stolen to the police.

4. I understand that if any of the above statements is false I am guilty of attempting to defraud the Company and my claim may be invalidated in to.

Signed by me this _____ day of _____ 20_____

Signature: _____

Witness: _____

Address: _____

Occupation: _____