

# POLICE REPORT



1. This document is an additional requirement to the funeral / death claim documentation, but only if cause of death is accidental

Policy number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

## A. Details of claimant

Male ☐ Female ☐

Full names \_\_\_\_\_ Surname \_\_\_\_\_

ID/ Passport number \_\_\_\_\_

## B. Statement by police

To be completed by the Investigating Officer at Station where incident was reported.

Case number 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Nature of accident/death ☐ Traffic Accident ☐ Work Accident ☐ Assault ☐ Aviation

If nature was traffic accident, please specify ☐ Pedestrian ☐ Passenger ☐ Driver

Give a description of the circumstances of death


Was a post mortem done? (if yes, copies of post mortem report should be submitted) ☐ Yes ☐ No

Was a blood test done? (if yes, copies of blood test result should be submitted) ☐ Yes ☐ No

Is suicide suspected? ☐ Yes ☐ No

Date of Inquest 

Y	Y	Y	Y	/	M	M	/	D	D
---	---	---	---	---	---	---	---	---	---

Inquest number 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Date of Case 

Y	Y	Y	Y	/	M	M	/	D	D
---	---	---	---	---	---	---	---	---	---

Court Name \_\_\_\_\_

Will criminal charges be brought? (if yes, state the charges below) ☐ Yes ☐ No

--

Who will the charges be brought against? \_\_\_\_\_

Full Names and Surname of investigating officer \_\_\_\_\_

## C. Details of deceased

Relationship to deceased ☐ Spouse ☐ Child ☐ Extended Family Member ☐ Other

Full names \_\_\_\_\_ Surname \_\_\_\_\_

ID/ Passport number \_\_\_\_\_ Date of death 

Y	Y	Y	Y	/	M	M	/	D	D
---	---	---	---	---	---	---	---	---	---

Cause of death \_\_\_\_\_

#### D. Declaration by Investigating Officer

Name of Police Station \_\_\_\_\_

Contact Number of Investigating Officer \_\_\_\_\_

\_\_\_\_\_  
Signature of Investigating officer

Y Y Y Y / M M / D D

Date

Contact Number of Police Station \_\_\_\_\_

Police Station Stamp

#### Contact us

Client Services:

010 880 5055

Physical address:

Safrican House 21 9<sup>th</sup> Street Houghton Estate 2198

E-mail address:

services@safrican.co.za