



GK GENERAL INSURANCE COMPANY LIMITED

NEW KINGSTON
Knutsford Boulevard

LIGUANA
Sovereign Cir.

DOWNTOWN
Duke Street

MANDEVILLE
Midway Mall

MONTEGO BAY
Fairview Shopping Ctr.

PORTMORE
Portmore Town Ctr.

Toll Free: 1-888-429-5GKG (429-5454)

Fax: 876-968-1920

Email: gkginfo@gkco.com

Website: www.gkgeneral.com

PLEASE ANSWER EVERY QUESTION

Policy No.:

Name of Insured _____ TRN _____ 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, showcase, 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 _____