

ECOSURE DEATH CLAIM FORM

EcoSure

Hupenyu hwakarongeka - Impilo ehlelekileyo

Please accept our condolences on your recent loss. We realize that this is a difficult time and we will do our best to make sure that the appropriate assistance and service is provided to expedite the process.

The claim is for (tick below)

☐ An Individual Mobile Number of Deceased _____

☐ A Burial Society Name of Burial Society/Club _____

Listed below are the documents required for the submission of a death benefit claim:

- Certified copies of Burial order, Order to bury or Death certificate
- Certified copies of IDs of claimant and 2 witnesses with the same surname as deceased
- Completed EcoSure Death Claim Form

ALL SECTIONS MUST BE COMPLETED.

DETAILS OF THE DECEASED

Surname _____ First Names _____

Date of Birth _____ ID Number _____

CLAIMANTS REPORT

Date of Death _____ Time of Death _____

Place of Death _____

Who identified the deceased? _____

Name _____ ID Number _____

Relationship _____ Mobile Number _____

Is it suspected that the death was a suicide? Yes _____ No _____

Was the deceased in a motor vehicle accident? Yes _____ No _____

If yes, was the deceased a: Pedestrian _____ Driver _____ Passenger _____

Where was the death reported? _____

Please write a short description of the circumstances of death _____

CLAIMANTS DETAILS

Surname _____ First Names _____

ID Number _____ Mobile Number _____

Relationship to deceased _____ Address _____

Signature _____ Date _____

WITNESS 1 DETAILS

Surname _____ First Names _____

ID Number _____ Mobile Number _____

Relationship to deceased _____ Address _____

Signature _____ Date _____

WITNESS 2 DETAILS

Surname _____ First Names _____

ID Number _____ Mobile Number _____

Relationship to deceased _____ Address _____

Signature _____ Date _____

NAME AND MOBILE NUMBER FOR ECOCASH TRANSFER/MERCHANT CODE _____