



Sure House
Plot 1 Bombo Road
P.O. Box 9393, Kampala Tel: +256 414 345996, +256 312 262119
Email: swico@swico.co.ug, Website: www.swico.co.ug

THEFT AND LOSS OF MONEY CLAIM FORM

Agency..... Claim No.

Insured: Name.....
Physical Address:
P.O. Box..... Tel:
Email..... Policy No:

Circumstances: When and where was the money last kept and seen?
Date..... Time.....
When was the loss discovered?
Date..... Time.....
Address where loss occurred.....
When did the loss/theft occur?
Who was/were responsible for the safety of the money at the time of the loss?
How long have/has they/he/she been employed by you?
Do you have any suspicions of persons likely to be implicated in the loss?
If so please give particulars.....
How often do you make your cash balances?
When did you make your last cash balance prior to this loss/theft?
Who are your bankers?
Does any party have an interest in the stolen money?



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Have you ever sustained a theft/loss of money? If so please give particulars?

.....

Theft/loss from premises

Were the premises forcibly entered?

If so how was entrance affected?

From what part of the premises was the money removed?

How much money had been kept in premises at the time of loss?

What security precautions had you taken?

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How much money was stolen?

If premises were not forcibly entered how was the money accessed to?

.....

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Who were/was present at the time of loss/theft?

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.....

.....

Is there any damage to the premises?

.....

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Theft/Loss Whilst in Transit

Where was the money being transported to?

Where was it being transported from?

What was the purpose of transportation?

Who was/were accompanying the money?

Do they/does he usually accompany the money while in transit?

What relationship does/do he/they have with you?



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If employed by you how long has/have/been employed by you?

How much was being transported at the time of the theft?

How much do you usually transport?

How much money was stolen?

What is the evidence that money was actually stolen?

What Security precautions were taken?

Please give statements of circumstances under which this theft/loss occurred and attach all supporting-
documents

STATEMENT(S)



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(Attach supplementary pages if necessary)

I/We hereby declare that the above statements and information given are true to the best of my/our knowledge.

Accordingly I/We claim the sum of Ugx shs

Date:Sign:

Witness:

Date: