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Parktown
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MiWayLife Police Statement

Strictly confidential

This form must be completed by the investigating officer at the police station where the death was reported.

Inquest / Case number: _____

Policy number: _____

A. Details of deceased

Name and surname: _____

Identity number: _____

B. Declaration by Police

Police station where the death was reported: _____

Date reported: _____

Name of the investigating officer: _____

Date of death: _____

Time of death: _____

Place of death: _____

Magisterial district: _____

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

If yes, was he/she the driver a passenger or pedestrian? _____

If the deceased was the driver, was he or she in possession of a valid driver's license? _____

Driver's License code and date issued _____

Was a blood alcohol test done on the deceased? Yes or No _____

If yes, what was the result? _____

Was the deceased involved in an assault? Yes or No _____

If yes, did the assault take place during the performance of his/her duties? Yes or No _____

If yes, please give details: _____

Is there a possibility that the deceased committed suicide? Yes or No _____

Was a post-mortem conducted? _____

If yes, please give full details: _____

Did/will an inquest take place? _____

If yes, in which court? _____

Date held / to be held: _____

Was an action brought forward / will any action be brought forward? _____

If yes, please give the name of the person charged / to be charged: _____

Has any verdict been passed? _____

If yes, what were the findings? _____

At which court? _____ Date of trial: _____

Trial number and reference: _____

If possible, please give a short description of the circumstances regarding the death: _____

Name of the Investigating Officer: _____ Telephone number (landline) _____

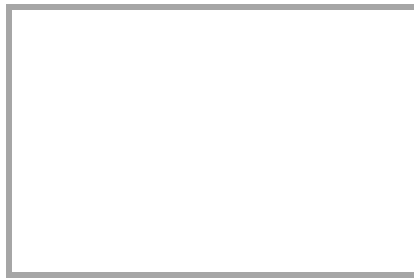
E-mail _____ Mobile (Cellphone) number _____

Rank _____ Force number _____

Signed at _____ date _____ month _____ year _____.

Signature of the investigating officer _____

Official Stamp:



MiWayLife Disclosures

POPIA

MiWayLife cares about your privacy. To provide you with our service, we and our service providers must process the personal information you provide us with by completing this form. We will treat this information with caution, and we have put reasonable security measures in place to protect it.

FICA

In line with the applicable anti-money laundering laws of South Africa, we are required to obtain specific information and evidence to verify your identity when applying for cover and on an ongoing basis. If we do not receive the requested information within a reasonable time, we may be unable to render our services.