FREE POLICYHOLDER RESOURCE

The Claim Survival Kit

A practical, step-by-step kit for South African policyholders — what to do in the first 48 hours, what to record, what to never sign, and how to protect your claim before an insurer's assessor arrives.

First 48 hours — do these immediately

- [ ] Make the site safe and prevent further loss (your policy requires reasonable steps to mitigate).
- [ ] Report the loss to your insurer and record the claim number, date, time and consultant's name.
- [ ] Report to SAPS where required (theft, malicious damage, civil unrest, hijacking) and keep the case number.
- [ ] Photograph and video everything **before** clean-up — wide shots, then close-ups, with date stamps.
- [ ] Do not discard damaged items until they are inspected and recorded — store them if safely possible.
- [ ] Keep every emergency invoice: security, board-up, pumping, drying, towing, alternative accommodation.

Evidence pack — build this file from day one

- [ ] Full policy schedule, wording and any endorsements in force on the date of loss.
- [ ] Premium payment proof for the period covering the loss.
- [ ] Written incident description: date, time, sequence of events, weather, witnesses.
- [ ] Photo and video inventory, saved with original filenames and metadata intact.
- [ ] Purchase invoices, warranties, bank or card statements proving ownership and value.
- [ ] Maintenance, service and compliance records (CoC, electrical, roof, plumbing, plant).
- [ ] Quotes from at least two independent contractors or suppliers.
- [ ] Every letter, email, SMS and call log with the insurer, broker, assessor and loss adjuster.

Never do these — they weaken good claims

- [ ] Do not sign a full and final settlement, discharge or acknowledgement of debt under pressure.
- [ ] Do not accept a verbal rejection — always request the decision and reasons in writing.
- [ ] Do not give a recorded statement without knowing what is being asked and why.
- [ ] Do not complete repairs before the loss and scope are recorded and agreed.
- [ ] Do not guess values or dates on a claim form — write "to be confirmed" instead.

- [ ] Do not let deadlines lapse: internal appeal, the 90-day dispute window, and prescription.

When the insurer’s assessor or loss adjuster attends

- [ ] Ask for their name, company and whether they act for the insurer.
- [ ] Walk the site with them and record the same damage they record.
- [ ] Request a copy of their scope of works or report — in writing.
- [ ] Never confirm a cause of loss you are not qualified to confirm.
- [ ] Consider appointing your own senior claims consultant and ECSA-registered engineer.

If your claim is rejected, underpaid or ignored

1. Request the written rejection with the exact policy clause relied on.
2. Request the insurer’s expert report and all documents relied on in the decision.
3. Lodge the insurer’s internal dispute or appeal in writing, within its stated period.
4. Note the 90-day window to refer the dispute after final rejection — diarise it.
5. Escalate to the National Financial Ombud (NFO) with a properly prepared submission.
6. Have the quantum independently prepared: scope, engineering causation and costing.

Get a second opinion at no cost

Complete the free 60-second Claim Check on **nkhadvisory.com** and a senior claims consultant will review your position. Offices in Johannesburg and Durban, acting for policyholders countrywide.