

STATEMENT BY SOUTH AFRICAN POLICE SERVICE

TO BE COMPLETED BY THE INVESTIGATING OFFICER AT THE POLICE STATION WHERE THE DEATH OF THE DECEASED WAS REPORTED OR IS BEING INVESTIGATED.

This certificate is required to substantiate a death claim under a policy issued by Chartis SA Limited on the life of _____ ID No. _____ and will be kept strictly confidential.

1	a) Full names of deceased:
	b) Date, time and place of death:
	c) Magisterial district:
2	Was the deceased involved in an accident?
	a) Was the deceased on duty, commuting to or from work, or on free time?
	b) If a transport accident was the deceased a driver/pilot, passenger/crew or bystander?
	c) Was a blood-alcohol test done? Result:
3	Was the deceased involved in an assault?
	a) Was the deceased assaulted during the course of his duties?
	b) Was the deceased an innocent bystander?
4	Was a post mortem carried out?
	If so, what were the findings?
5	Is suicide suspected?
6	Has or will an inquest be held in this regard?
	a) Name of court:
	b) Date of Inquest:
	c) Inquest case number and reference:
7	Have or will criminal proceedings be instituted in this regard?
	a) What was the charge? b) Who was charged?
	c) Relationship to deceased:
	d) Was a conviction obtained? e) Name of court:
	f) Date of trial: g) Trial number and reference:
8	Name of police station where death was reported:
	a) Case reference number: b) Investigating officer:
9	a) Has the deceased been formally identified? b) If so, by whom?
10	Provide a brief description of the circumstances of the death: _____

Dated at _____ on this the _____ day of _____ 2000

Signature of investigating officer

Name and Rank: _____
Force number: _____
Telephone number: _____