



Turning Claims into Insight, Action, and Value

At Xcelsior, we deliver independent claim assessments with clear investigations and defensible reporting.



www.xcelsior.co.za



Company Introduction

Independent loss adjusting support for insurers and brokers who need clear facts, structured assessments and reliable claim



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“Clear claims start with clear evidence, accurate assessment and reporting you can trust.”

XcelSior Loss Adjusters is an independent loss adjusting practice based in Cape Town, supporting insurers and brokers with professional non-motor claim assessments.

We help turn claim information into clear, structured findings through practical investigation, policy-aligned assessment and defensible reporting.

Our role is to reduce uncertainty, support fair claim decisions and provide the clarity needed to move each matter forward with confidence.

About Xcelsior



Independent Claim Assessment Partner

Xcelsior Loss Adjusters provides independent, structured claim assessments for insurers and brokers who require clear facts, reliable reporting and policy-aligned findings.

We support non-motor claim decisions through practical investigation, document review, evidence assessment and professional reporting.

How We Work

We investigate, assess and report with clarity - helping insurers and brokers make informed claim decisions with confidence.



Our Focus

Assessment Focus
Non-Motor Claims



Client Support
Insurers & Brokers



Claim Confidence

Xcelsior helps insurers and brokers make confident claim decisions by turning complex claim information into clear, structured findings.

Through investigation, document review and policy-aligned reporting, we provide the clarity needed to move claims forward with accuracy and accountability.

Precision in Every Claim



Xcelsior Loss Adjusters

Independent claim assessment and reporting support for insurers and brokers handling non-motor domestic claims.



Independent assessments that turn claim uncertainty into confident decisions.

Xcelsior helps insurers and brokers investigate, validate and resolve non-motor domestic claims with confidence.

Each assessment follows a structured approach aligned to policy terms, improving clarity, consistency and accountability throughout the claims process.

From investigation to final reporting, the focus remains on defensible findings that decision-makers

Outcomes

Clear findings, efficient turnaround and decision-ready reports aligned to policy conditions.

Services

Tailored claims solutions for confident decision-making

Claim Investigation Independent assessment of non-motor claims, confirming facts, documenting damage and gathering the details insurers need to respond with confidence. Includes on-site investigation, evidence capture and clear findings aligned to claim circumstances.	Policy Verification & Liability Verification of policy existence, cover and insurable interest, followed by a clear determination of policy response and insurer liability. Helps reduce uncertainty, limit disputes and support faster, cleaner claim decisions.	Documentation Validation Claim documents are reviewed and validated to confirm accuracy, completeness and alignment with policy conditions. Supports decision-ready outcomes and improves turnaround from assessment to resolution.
Risk Commentary & Recommendations Practical risk insights provided during assessment, including risk analysis, improvement opportunities and recommendations to reduce repeat losses. Helps strengthen underwriting, claims handling and client risk	Reporting & Fraud Support Professional reporting on investigations and findings, including support where suspected fraud or criminal activity is identified. Helps insurers make informed, cost-effective decisions on non-motor claims.	Service Outcome Clear, structured claims support that helps insurers and brokers make confident, policy-aligned decisions. Built to improve clarity, turnaround and accountability across the claims process.



Clear findings. Faster decisions. Policy-aligned reporting.



Benefits

Better information. Better Claim Decisions.



Clarity

Clear findings and structured reporting that reduce uncertainty and help decision-makers understand what happened.



Turnaround

Efficient assessments that support faster decisions, smoother claim handling and reduced back-and-forth.



Confidence

Decision-ready reports aligned to policy, with evidence insurers and brokers can rely on.



Accountability

A structured, professional process that supports fair, accurate and defensible claim outcomes.

Built on Trust Backed by Outcomes



Defensible Reporting

Clear, professional reports that support confident claim decisions, with evidence that is structured, consistent and easy to follow

Efficient Turnaround

A structured assessment process that reduces rework and helps move claims from investigation to resolution faster.

Policy-Aligned Findings

Findings aligned to policy terms and claim circumstances, giving decision-makers a reliable view of what happened and what it means.



Clear Evidence

Information is gathered, reviewed and documented so that claim decisions are based on facts, not assumptions.

Practical Assessment

Each claim is assessed in line with policy conditions, claim circumstances and the realities identified during investigation.

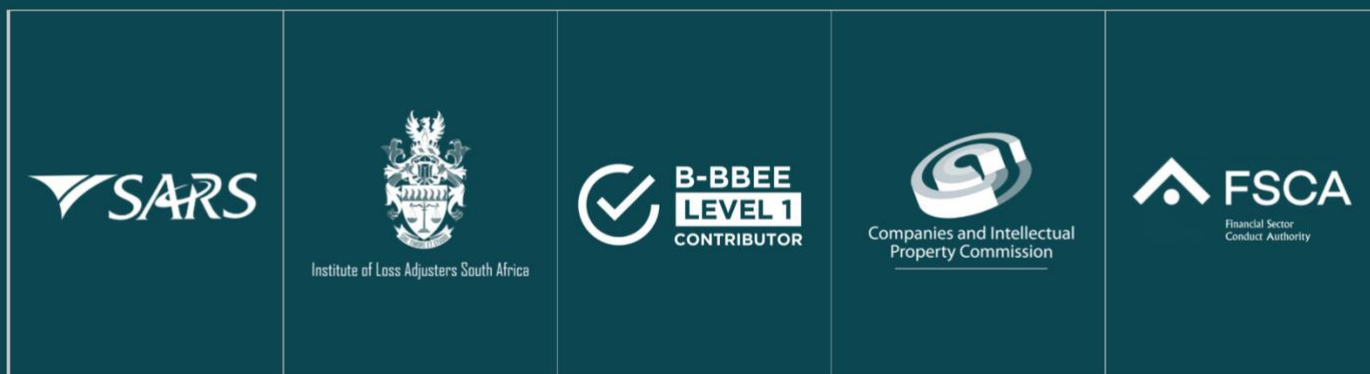
Decision-Ready Reporting

Findings are presented clearly, helping insurers and brokers move each claim forward with confidence.

Industry Partners



Accreditation & Compliance



Professional Standards. Trusted Relationships. Accountable Claims Support.

Xcelsior works with a commitment to ethical, structured and policy-aligned claim support. Our compliance standing and industry relationships help support trusted, defensible outcomes for insurers and brokers.



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