

INFORMATION TO AUTHORITY

Has the loss been reported to an Authority? Fire Brigade Police Municipality Labour Authority Others
 If 'Yes', date reported _____ No. _____ (Please attach copies of correspondence exchanged with the authorities)
 If 'No', reason for not reporting _____

C. DETAILS OF OTHER INSURANCE

Is the loss/damage covered under any other Insurance (Yes) (No), If 'Yes', specify details and attach a copy of the policy

Name of the Insurer _____
 Policy Number _____
 Policy Type _____
 Period of Insurance d d / m m / y y y y to d d / m m / y y y y
 Sum Insured (Rs.) _____

D. DETAILS OF OTHER INTEREST

Is the Insured the Sole Owner of the property? (Yes) (No), If 'No', specify

Nature of Interest _____
 Person/s who has/have interest on property _____
 Address _____
 City _____ State _____ Pin Code _____
 Phone STD Code _____ No. _____ Mobile + 9 1 _____
 E-mail ID _____

E. DETAILS OF PREVIOUS LOSSES

Losses during the 3 preceding years

Date of Loss	Nature and Cause of Loss	Value of Loss (Rs.)	Insurer

F. DETAILS OF OTHER INFORMATION

Please provide any other relevant information pertaining to this property and incidence.

I/We, do hereby, to the best of my/our knowledge and belief, warrant the truth of the foregoing statements in every respect; and I/We agree that if I/We have made, or make in any further declaration, the Company may require in respect of the said accident, any false or fraudulent statement, or any suppression or concealment, my/our claim shall be absolutely forfeited, and the Policy shall be null and void, and all rights to recover there under in respect of past or future loss/accident shall be forfeited.

I/We, undertake to refund the amount claimed to the event of all or any of the lost items being recovered.

I/We, undertake to take all practicable steps to apprehend the guilty person(s) and to recover the property lost.

Place : _____ Signature : _____
 Date : d d / m m / y y y y Name of Insured / Claimant : _____

*** INDICATIVE LIST OF DOCUMENTS REQUIRED FOR CLAIM SETTLEMENT**

1. Claim Form
2. First Information Report and Final Police Report
3. Books of Accounts and Inventory Register
4. A list of all stolen and damaged items along with its intrinsic value and amount damage sustained
5. Letter of Indemnity
6. No Objection Certificate from the financier if claim is to be settled in your favour
7. Claim Bill with supporting documents (Original Repair / Replacement Bills)

* Additional documents required by insurer if any, will be intimated to you as and when required