

Prabhu Insurance Limited

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FIRE CLAIM FORM

Policy No. :		Claim No.:			
Na	me of Claimant :		Section of the sectio		
Name of the Insured :					2 7
Address :		-		,	70
1.	When did the Fire/ Riot & Strike/ Earthquake/ Strom/ Flood take place.	<u>Date</u>	<u>Month</u>	<u>Year</u>	<u>Time</u>
2.	Situation of the Property damaged or destroyed			(a)	
3.	How were the Premises occupied at date of the loss ?			13	
4.	What was the cause of loss and under what circumstances did it occur?			el e	1
5.	Does the Policy give a correct description of the property in all respects as it existed immediately before the loss?	0		n 3	
6. i) ii)	Whether the loss intimated to: Police Fire Brigade			100	22. ⁷⁸
7.	Have the conditions and the Warranties of the Policy been complied with in every respect?				ile di
8.	Is the Claimant Sole Owner of Property damaged or destroyed? If not, state full Particulars or any other interest.	2 2 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
9.	Has there been a previous accident of Fire/Riot & Strike Strom/Earth-quake/Flood in these Premises of in any other Premises in which the Insured was interested? If so, state full particulars including the cause of such incidents.			**************************************	
10.	Were there at the time of the loss any existing insurances, whether effected by the claimant or by any other person, on said Property with any other Insurer? If so, state full Particulars. If not Please write "No".	2.	10 ***		

Details of Claim for the Property Destroyed or Damaged

A fire Policy being a contract of INDEMNITY, so all claims must be based upon the ACTUAL value of the Property damaged.

Description of the Property Damaged	Actual Value at the time of loss	Less Salvage	Net Amount Claimed	
	λ.			
Total Rs.				

Declaration

I / We hereby declare that the particulars furnished above are True and correct to the best

of my / our knowledge.	
Place:	Signature:
	Seal:
Date:	Name: