

Claim Form





SMS		
'LTI' to	5607058	(56070 LT)

GUIDELINES TO FILL THE FORM

- 1. Please fill the form in BLOCK LETTERS. Please answer all questions fully and correctly. All the questions are mandatory.
- 2. Please leave one box blank between two words while writing the ADDRESS.

FOR OFFICE USE ONLY				
Intermediary Name:				Щ
Intermediary Code:				

3. Kindly contact the Company's Office or Intermediary for any doubts or clarifications on the claim form. PLEASE USE ONLY ORIGINAL CLAIM FORM. PHOTO COPIES WILL NOT BE ACCEPTED BY THE COMPANY.
(THE ISSUE OF THIS FORM IS NOT TO BE TAKEN AS AN ADMISSION OF LIABILITY)
As soon as any Accident, Loss or Damage has become known, the Company must be notified without delay. If any detail or information is not readily available, please do not delay dispatch of this form and other particulars may be sent later.
Claim No: Policy No/Cover Note No: Policy No/Cover Note No:
Period of Insurance: D D M M Y Y Y Y To D D M M Y Y Y Y Y Customer ID: L L L L L L L L L L L L L L L L L L L
POLICY HOLDER INFORMATION (Please enter details of the Insured)
Title (Pls. Tick): Ms. Mrs. Mrs. Mr.
Name: F R S T
Correspondence Address (Please fill in, if current address is different from as given in the policy document)
Block/Flat No.: Floor No.: Building Name:
Street Name:
Landmark:
City/Village: Pincode: Pincode:
Post Office: Fax No.: Fax No.:
Mobile No.: STD Landline: STD Landline:
Email ID 1:
Email ID 2:
Do you want us to effect the above change of correspondence address in policy document for all future correspondences?
Name of Supervising Engineer:
BANK DETAILS (Required for Electronic Fund Transfer)
Name of the Account Holder:
(as appearing in the Bank Account)
Bank Name:
Branch: Location: Location:
Account No:
MICR Code:
PARTICULARS OF ACCIDENT:
Date & Time of occurrence: D D M M Y Y Y Y H H H : M M
Full address of loss location:

•	Give details on extent of the loss / da	mage:	
	(a) To Contract Works:		
	(b) To Construction Plant & Equipr	nent:	
	(c) To Property belonging to Third	Parties:	
•	What was the cause of the damage?		
•	Is any one responsible for the damag	e? Yes No	
	If Yes, state details:		
•	Is there any possibility of recovery?	Yes No	
DE	TAILS OF THE DAMAGED SECTION / N	VORKS	
i)	How did the damage occur? (attach s	ketches, photos, etc):	
ii)	How far had the construction of the d	lamaged item(s) progressed at the tim	e of the occurrence of damage?:
iii)	How will the damaged items be repai	red?:	
•	Will any alterations or improvements Give name & address of witness to th		
•			
•	Are existing buildings / surrounding p	roperties damaged? Yes	No
•	Are existing buildings / surrounding p If 'Yes', State details: What are the estimated costs for repa	roperties damaged? Yes ir of damage to:	No
•	Are existing buildings / surrounding p If 'Yes', State details: What are the estimated costs for repa	roperties damaged? Yes ir of damage to:	No
•	Are existing buildings / surrounding p If 'Yes', State details: What are the estimated costs for repa Contract Works: Construction Plant & Machinery:	roperties damaged? Yes ir of damage to:	No
•	Are existing buildings / surrounding p If 'Yes', State details: What are the estimated costs for repa Contract Works: Construction Plant & Machinery: Third Party Property:	roperties damaged? Yes ir of damage to: ₹ ₹	No
•	Are existing buildings / surrounding p If 'Yes', State details: What are the estimated costs for repa Contract Works: Construction Plant & Machinery: Third Party Property: Owner's Surrounding Property:	roperties damaged? Yes ir of damage to: ₹ ₹ ₹	No
•	Are existing buildings / surrounding p If 'Yes', State details:	roperties damaged? Yes ir of damage to: ₹ ₹ ₹ ing same property, if any:	No
• DEc	Are existing buildings / surrounding p If 'Yes', State details:	roperties damaged? Yes ir of damage to: ₹ ₹ ₹ ing same property, if any:	No
I/W I/W	Are existing buildings / surrounding p If 'Yes', State details:	roperties damaged? Yes ir of damage to: ₹ ₹ ing same property, if any:	warrant the truth of the foregoing statements in every respect; and I/We agree that in respect of the said accident, any false or fraudulent statement, or any suppression
I/W I/W con of p	Are existing buildings / surrounding p If 'Yes', State details:	roperties damaged? Yes ir of damage to: ₹ ₹ ing same property, if any: best of my/our knowledge and belief, eclaration, the Company may require in my/our claim shall be absolutely forfeit feited.	No