

**Edelweiss** | GENERAL INSURANCE

<b>Policy Number:</b>	<b>Claim Number:</b>
-----------------------	----------------------

[illegible]

Date:	<input type="text" value="D"/>	<input type="text" value="D"/>	<input type="text" value="M"/>	<input type="text" value="M"/>	<input type="text" value="Y"/>	<input type="text" value="Y"/>	<input type="text" value="Y"/>	<input type="text" value="Y"/>	Time:	<input type="text" value="H"/>	<input type="text" value="H"/>	:	<input type="text" value="M"/>	<input type="text" value="M"/>	Place:	<input type="text"/>
<b>Contact details of person/s at Loss location</b>																
Name:									Relationship with Insured:							
Contact details:									Email id:							
Description of Loss:																

Sr. no.	Description of the property claimed	Sum Insured (₹)	Amount Claimed (₹)

1. Has the loss or damage been reported to the Police/Fire Brigade : Yes ☐ No ☐ (If yes, please attach a legible copy of FIR/Fire Brigade report)
2. Has the loss/damage been caused due to AOG perils like flood, earthquake etc.: Yes ☐ No ☐ (If yes, please attach a copy of report from the meteorological department/newspaper clipping)
3. Is there any other insurance covering the present loss: Yes ☐ No ☐ (If yes, please provide name of Insurer(s), policy number and policy copy)  
 Name of Insurer(s) \_\_\_\_\_ Policy Number: \_\_\_\_\_
4. Have you ever suffered a loss or damage in the past : Yes ☐ No ☐ (If yes, please provide date, Amount of Loss & Name of Insurer)  
 Date 

D	D
M	M
Y	Y
Y	Y

 Amount of Loss 


 Name of Insurer \_\_\_\_\_
5. Have you taken any measures to minimize the loss: Yes ☐ No ☐ (If yes please provide details)  
 \_\_\_\_\_
6. Was there another person, in your opinion, responsible for loss or damage: Yes ☐ No ☐ (If yes please provide details)  
 \_\_\_\_\_
7. Is the property subject to hire purchase or hypothecation agreement? Yes ☐ No ☐ (If yes please provide details)  
 \_\_\_\_\_
8. Has there been any alteration in the occupation or use of the premises since the policy was taken up: Yes ☐ No ☐ (If yes, please provide details of changes/alterations in occupations)  
 \_\_\_\_\_
9. Are you're the sole owner of the premises/property: Yes ☐ No ☐ (If not, please provide details of other interested parties)  
 \_\_\_\_\_
10. At the time of loss, what was the total value of all the property in the premises?  
 \_\_\_\_\_

Bank Name:		Branch name:		IFSC Code :	<div></div>
Account Number:	<div></div>				

I/We declare that I/We have not withheld any material information and that all statements made on this form are true to the best of my/our knowledge and belief and that the articles/property described above belongs to me/us, and that no other person has any interest therein whether as Owner, Mortgagee, Trustee or otherwise except as mentioned in the policy. I/We agree to provide additional information to the company, if required. I/We understand that any statement/part of statement found false/fraudulent or any suppression of facts observed the policy shall be void and all the rights to recover there under in respect of past or future accident shall be forfeited.

Date: 

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Place: \_\_\_\_\_

Signature of Insured:

General documents - All Claims	Specific documents in addition to general documents				
1. Policy copy 2. Duly filled & signed claim form by Insured 3. Estimate of Loss 4. Inventory details both sound & damaged 5. Incident report with witness details 6. Repair bills with payments receipts 7. Salvage Quote	<table border="1"> <thead> <tr> <th>Fire/Explosion</th> <th>AOG Perils</th> </tr> </thead> <tbody> <tr> <td>               1. FIR                2. Fire Brigade report                3. Lab test reports, if any                4. Report from inspector of factories                5. Newspaper Cuttings             </td> <td>               1. Metrological report                2. Newspaper Cuttings  <b>Strike/Riots/Malicious/Terrorism</b>                1. Police report                2. Newspaper Cuttings  <b>Deterioration of stocks due to power failure</b>                1. Stock register                2. Certificate from Electricity board             </td> </tr> </tbody> </table>	Fire/Explosion	AOG Perils	1. FIR 2. Fire Brigade report 3. Lab test reports, if any 4. Report from inspector of factories 5. Newspaper Cuttings	1. Metrological report 2. Newspaper Cuttings <b>Strike/Riots/Malicious/Terrorism</b> 1. Police report 2. Newspaper Cuttings <b>Deterioration of stocks due to power failure</b> 1. Stock register 2. Certificate from Electricity board
Fire/Explosion	AOG Perils				
1. FIR 2. Fire Brigade report 3. Lab test reports, if any 4. Report from inspector of factories 5. Newspaper Cuttings	1. Metrological report 2. Newspaper Cuttings <b>Strike/Riots/Malicious/Terrorism</b> 1. Police report 2. Newspaper Cuttings <b>Deterioration of stocks due to power failure</b> 1. Stock register 2. Certificate from Electricity board				