

FUTURE SECURE COMMERCIAL VEHICLE PACKAGE POLICY CLAIM FORM

Issue Of This Claim Form Is Not To Be Taken As An Admission Of Liability

- a. The claim form is to be duly filled and signed by the insured.
- b. All facts and statements must be factual not influenced or biased in any favour.
- c. The damaged vehicle shall not be left unattended without proper precaution being taken to prevent further damage.

Policy Number			
Vehicle No			
Claim No.			
Period Of Insurance	From		To
INSURED DETAILS			
Name Of Insured/Claimant			
*Address			
	City:	State:	Pin c ode:
Contact Details	Phone No.	Mobile No.	Email Id:
Name (As per Bank Account)			
Bank Details - Bank Name			Branch
Type of Account			A/c No.
IFSC Code			PAN No.
MICR			Aadhar No.
LOSS DETAILS			
Date of Accident		Time of Accident:	am/pm
Place of Accident			
Type of Loss	Own Damage	Theft	Third Party
	<p>In case, the claim has triggered in any of the add-on. Please provide the details.</p> <hr style="border: 1px solid black;"/>		

Short Description of Accident				
Police Report Details, if any				
DRIVER DETAILS AT THE TIME OF ACCIDENT				
Name		Age		
Driver License No.		Name of RTO		Learner's License Yes/No _____.
Co-passenger details				
APPLICABLE FOR COMMERCIAL VEHICLE				
No. of passengers carried at the time of Accident		G R Number & Date		
Permit No.		Permit Issuing Authority		
Permit Valid Up to		Permit Valid for (Area)		
Fitness Granting Authority		Fitness Valid up to		
APPLICABLE FOR THIRD PARTY PROPERTY DAMAGE OR INJURY				
Name of Third party / occupants/driver/property		Contact No	Type of Injury/property damage	Name of the hospital where admitted
				Any Legal / Court Notice Received
I HEREBY DECLARE HAVING SUBMITTED THE FOLLOWING DOCUMENTS				
<input type="checkbox"/> Copy of Policy/Cover Note <input type="checkbox"/> Copy of RC Book <input type="checkbox"/> Copy of Driving License <input type="checkbox"/> Estimate of repairs <input type="checkbox"/> Copy of Fitness Certificate <input type="checkbox"/> Copy of Permit <input type="checkbox"/> Copy of FIR <input type="checkbox"/> G.R Form				
DECLARATION				
<p>I/We here by declare that the details given above are true and correct to the best of my belief and knowledge .In event above information or any part thereof is found incorrect, I/We agree that all rights under the policy will be fortified. I/We also agree to provide additional information to the company, if required.</p> <p style="text-align: right;">Insured Signature</p> <p>Date:</p>				

List of Documents Required

- Claim Intimation
- Policy Copy
- Claim form
- Copy of RC book
- Copy of Driving License
- Estimate
- Photos
- Survey Report
- Survey Fees Bills
- Supplementary Report / Re-inspection report
- Final repair invoice and receipt / Satisfaction voucher for cashless payment

Addition Documents For Commercial Vehicle

- Fitness Certificate
- Copy of FIR
- Permit
- Load Challan

Theft Claims

- Claim Intimation
- Original Policy
- Claim Form
- Original Registration certificate
- FIR
- Original Set of Keys
- Original Sales Invoice & Tax Receipt
- Intimation to RTO (to inform RTO that the vehicle is stolen and not to transfer)
- Final Report
- Transfer papers
- Indemnity Bond
- Subrogation Letter

NEFT Payment

- Cancelled Cheque for NEFT Payment

AML Documents – for claims above One Lakh Rupees

- Photo Identity Proof
- Passport size photo – (Individual) – Mandatory
- Pan card - Mandatory
- Passport / Driving License / voters ID Card
- Proof of Address – (last six month)
- Telephone Bill / Electricity Bill / Bank Statement / Ration Card Memorandum of understanding / Registration of Company – (Regd. Company / firm / establishment)

The list given is indicative in nature. Further additional documents may be called for depending on the nature of the claim.