

**FG ELECTRIC VEHICLE BATTERY - EXTENDED WARRANTY**

**CLAIMS FORM**

**Important Note:**

1. The claim form is to be duly filled and signed by the Insured
2. All facts and statements must be factual not influenced or biased in any favor
3. Issuance of this claim form is not to be taken as an admission of liability

1. Policy Number	
2. Certificate Number	
3. Claim Number	
4. Insured Details a. Name: b. Address: c. Mobile No.: d. Landline No.: e. Email id:	
5. Vehicle Details a. Vehicle Identification Number b. Make/ Model c. Age of Vehicle d. Mileage (Kms) e. Battery Pack Serial No. f. Manufacturer's Warranty Period g. State of Health Inspection Date	
6. Have the servicing requirements as per the policy been adhered to ?	
7. Trouble Description	

8. Estimated Expense	
<p>Please submit:</p> <ol style="list-style-type: none"><li>1. Copy of Policy/Certificate</li><li>2. Original Extended Warranty Invoice having owner's signature</li><li>3. Estimate of Repairs</li></ol>	
<p>Declaration</p> <p>I/ We hereby declare that the details given above are true and correct to the best of my belief and knowledge. In the event the above information or any part thereof is found incorrect, I agree that all right under the policy will be forfeited. i/ We also agree to provide additional information to the company, if required.</p> <p>Date:</p> <p>Place:</p> <p>Signature of the Insured:</p>	