

MOTOR CLAIM FORM

THE ISSUE OF THIS 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 Number _____ Claim Number _____

Insured Details

Name _____
 Address _____
 City _____
 State _____ Pin _____
 Mobile _____ Landline _____ Email _____

* Please note that claim cheque (if any) will be dispatched to the address mentioned above. This address will be updated in above mentioned policy.

Name (As per Bank Account) _____
 Bank Details- Bank Name _____ Branch _____
 Type of A/c _____ A/c No _____ PAN No. _____
 IFSC Code _____ MICR _____

Loss Details

Date & Time of Accident DDMMYYYY HHSS am/pm
 Place of Accident _____ Types of Loss : Own Damage Theft *Third Party
 Short Description of Accident _____

Police Report Details, if any _____

Driver Details at the time of Accident

Name _____ Age _____
 Driver License No. _____ Name of RTO _____ Learners 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

- Copy of Policy/Cover Note Copy of RC Book Copy of Driving License Estimate of Repairs
 Copy of Fitness Certificate Copy of Permit Copy of FIR G. R. Form

DECLARATION:

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 forfeited. I/We also agree to provide additional information to the company, if required.

Date: _____

Insured Signature _____

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

- IPhoto Identity Proof
- Passport size photo – (Individual) – Mandatory
- Pan card - Mandatory
- Passport / Driving License / voters ID Card
- IProof 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.**