

Claim Form Business Guard - Udyam Package

THE ISSUANCE OF THIS FORM IS NOT TO BE TAKEN AS AN ADMISSION OF LIABILITY

As soon as 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 such particulars may be sent later.

Policy Number:

A.

Name of insured ("You" as per policy)	
Address	
City	Pin Code:
Telephone Number / email id	email id
Period of Insurance	From To
If Insured is not the sole owner, the nature of his/their interests in the property and the details of other Interests.	

B. DETAILS OF THE LOSS

Date & Time of Loss	
Who noticed the loss and when?	
Detail the Circumstances leading to the Loss and its cause.	
Whether Loss has been intimated to Police / Fire brigade / any other authorities	
If yes, also attach copies of their report	
Estimate of Loss	

C. DETAILS OF OTHER INSURANCES

	Give details of other Insurance's, if any, covering affected property	
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D. DETAILS OF PREVIOUS LOSSES

	Give details of Previous Claims, if any, on the affected property.	
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I / We hereby declare that the above questions have been conscientiously and faithfully answered and would be liable for the correctness and completeness of the statement. I understand that if any of the statement mentioned herein is untrue the entire claim under the policy will be forfeited

Date :

Place:

Signature of the Insured

For more information, call the Tata AIG 24-hour Helpline at 1800-11-9966*/1800-266-7780