National Insurance Company Limited

CIN - U10200WB1906GOI001713   IRDAI Regn. No. – 58

National Bharat Sookshma Udyam Suraksha Policy
Claim Form

"Please note that, issuance of claim form does not imply acceptance of liability"

Please provide details as required:

1.	Name of the Insured	
2.	Address of insured property	

3. Please give following details pertaining to all the policies involved in loss incident.

Sl. No	Policy No.	Risk Covered	Location	Sum Insured	Estimated amount of loss

4.	Period of Insurance	
5.	Date and Time of loss	
6.	Nature and Cause of Loss (Please describe the circumstances leading to the loss and attach some photographs)	
7.	Photographs of loss or physical damage submitted?	Yes ☐ No ☐ If Yes, Nos _____
8.	Whether Loss intimated to (tick against the box)	Police ☐ Fire Brigade ☐ Other ☐
	Details of report made. (Enclose the copy with the claim form)	
9.	Details of loss of contents (items, damage and amount of loss)	
10.	Details of loss of stock (raw materials, in process finished goods)	
11.	Details of damage to building (damage and amount of loss)	
12.	Details of loss or damage under any Optional Cover or Add-ons	Yes ☐ No ☐ If Yes, complete following sections
13.	Whether you have submitted all declarations prior to this loss incident in case of Declaration policy:	
14.	If insured is not sole owner, the nature of his/their interest in the property and details of other interests	

15. Details of any other insurance providing similar coverage	
16. Any claim reported under the policy during the policy period? If yes, give details regarding: (a) Cause (b) Date of incident (c) Claim (d) Policy Issuing Office (e) Amount of claim paid/Outstanding Rs.	

Please use additional pages, if required.

I hereby declare that the particulars furnished above are true and correct to the best of my knowledge.

Place:

Date: **Signature of the Insured/Legal Representative**