BHARTI AXA GENERAL INSURANCE COMPANY LIMITED,
First Floor, The Ferns Iron, Survey No. 28, Next to Akme Rallet

First Floor, The Ferns Icon, Survey No. 28, Next to Akme Ballet, Doddanekundi, Off Outer Ring Road, Bangalore- 560037.

Toll Free Helpline: 1800-103-2292 E-mail: claims@bharti-axagi.co.in SMS <CLAIM> to 5667700 Website: www.bharti-axagi.co.in



AGRICULTURAL PUMPSET CLAIM FORM

ISSUANCE OF THIS FORM IS NOT TO BE TAKEN AS ADMISSION OF LIABILITY Please fill this form in **Block Letters** and **Tick the Boxes** where appropriate and do not leave any column unanswered. Policy Number: Claim Number: Name: Address: Pin code: Mobile No.: Telephone No.: E-mail Address: **B. LOSS DETAILS** Date & Time of loss: Nature of loss Fire Theft Breakdown Short Description of Loss Serial Number of pump set Makers name & year of make **C. ADDITIONAL DETAILS** In case of Theft: FIR No / Station Diary No. P.S Name In case of Breakdown: a. Has the manufacturers warranty period expired, if yes, when? b. When was machine last overhauled or attended for maintenance c. Approx Loss Amount d. Name & Address of Repairer of pump-set Do you wish to provide any other information as relevant to the claim made if yes, details (if required you may please attach a separate sheet) I/We agree to provide additional information to the Company, if required. I/We the above named, do hereby, to the best of my/our knowledge and belief, warrant the truth of the foregoing statement in every respect, and if I/We have made, or in any further declaration the Company may require in respect of the said accident, shall make any false or fraudulent statement, or any suppression or concealment, the policy shall be void and all rights to recover thereunder in respect of past or future claims shall be for feited. Date:

Signature / Left Thumb Impression of Insured

Place: _