## REGD. OFFICE: BHARTI AXA GENERAL INSURANCE COMPANY LIMITED

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

Downloaded from www.insureatclick.com - Broker: Loyal Insurance Brokers Ltd.

If yes, please attach the copies of the reports.

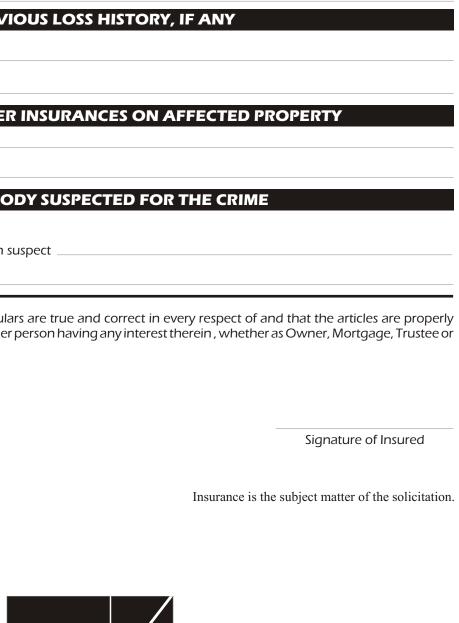


## **BURGLARY INSURANCE CLAIM FORM**

THE ISSUE OF THIS FORM IS NOT TO BE TAKEN AS AN ADMISSI	BILITY OF LIABILITY. PBC/PBI/PBP
Please fill this form in <b>Block Letters</b> and <b>Tick the Boxes</b> $\checkmark$ will let up the sent later.	
Policy Number:	
Claim Number:	
Period of Insurance: DIDIMIMIYIYIYIY to DIDIMIMI	
A. DETAILS OF	INSURED/s
Name:	
Address:	
	Pin code:
Telephone No.:	
E-mail Address:	
Financier's Details:	
Address of Financier:	
	Pin code:
Telephone No:	
If the insured is not the sole address, please submit the details about your intere	est in the property and extent upto
B. LOSS DI	TAILS
Time & Date of loss: (Hrs.)	YIYIY
The address of the premises where the loss took place.	
Who noticed the loss & when:	
Please attach a statement of the person.	
Whether the premises was occupied at the time of loss and	
a. If yes for what purpose	
b. If no then since when it was lying unoccupied	
The details of circumstances leading to loss and also state how the	ne entry/exit in the premises was affected.
Please attach separate sheet, if necessary.	
C. LOSS INTI	MATION
Whether loss has been intimated to Police Authoriti	es Yes No

If yes please give details	
	E. PREVIOUS LOSS HISTORY, IF ANY
F. C	DETAILS OF OTHER INSURANCES ON AFFECTED PRO
	G. IF ANYBODY SUSPECTED FOR THE CRIME
Yes No	
If yes please give the na	me and address of such suspect
	·
l/We hereby declare the described belong to the otherwise.  Date:	
	Insurance is the
80-c0/HO	Into a set is AVA
	bhartí <b>AXA</b>
80-00/HOV	general insurance

Are these damages to the premises also and if you are responsible for the repairs of the same



Yes

No

## Bharti AXA General Insurance Company Limited

**D. DETAILS OF AFFECTED PROPERTY** 

Please give the details of the property lost/burgled

Please attach a separate sheet giving the items and their values lost

The total value of the property at the premises just before the loss.

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