



National Insurance Company Limited

Regd. Office 3, Middleton Street, Post Box 9229, Kolkata 700071

CIN - U10200WB1906GOI001713

IRDA Regn. No. - 58

Issuing office

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BURGLARY CLAIM FORM

(This issue of form is not to be taken as admission of liability)

Claim No.	
Name of the Insured & Address with Tel. No.	
Policy No.	

1. Address of premises where loss occurred (State whether private house, godown, sale-shop, *flat hotel, etc. outbuilding thereof) , Nearest Railway Station	
2. If the premises were forcibly entered? a. at what date and hour was the theft committed? b. How precisely was entrance effected?	
3. If Premises was forcibly entered a. From what part of the premises was the property taken? b. At what date and hour (if known) was the Theft committed? If not known, when was the stolen property last seen prior to the Theft? c. Has the thief been identified? If not, what evidence is there that a theft has been actually committed? d. Do you suspect any one?	
4 (a) Where the premises inhabited at the time of the theft? 4(b) If not, upon what date and at what hour were they last inhabited prior to the Theft?	
5. (a) Have the Police Authorities been informed of the Theft? (b) If so, on what day and at which Police Station and the Dairy No.? © Has any arrest been made?	

6. I the claimant the sole owner of the property stolen or damaged?	
7. What is the estimated value of the total contents of the premises at the time of the Theft?	
8. (a) For What sum is the contents of the premises insured against Fire? (b) With what Company is the Fire Insurance effected?	
9. Has the claimant ever before sustained loss by Fire or by Theft? If so, brief particulars should be given	
10. Are there any other insurance against Theft upon the same property?	

I/We _____ of _____ do hereby affirm and declare that all the above statements and statements contained in the within list of stolen or damaged articles are in all respect true and complete and are made without reservation of any kind and in accordance with the particulars given in the said list.

I/We claim the sum of Rs. _____ I/We do further affirm and declare that to my/our knowledge, all the property specified in the said list was contained in the premises at the time of the theft and that no other person than myself/ourselves has/have any interest in the property by bill of sale or as owner, mortgagee, trustee or otherwise and that there are no other insurances in respect of loss by theft effected on the said property by me/us or so far as I am aware by any other person except*

_____ and I/We undertake to refund the amount or amounts claimed in the event of all or any of the lost articles being recovered.

Date this _____ day of _____ 20

Signature of Claimant _____

