

b. Third Party Property

7. Please provide cause of loss/ damage

8. Is any third party responsible for the damage? YES NO

If YES, please state details

9. Were the Police authorities or Fire Brigade informed? YES NO

If YES, please provide details

DETAILS OF DAMAGE

10. Whether property affected was undergoing testing? YES NO

11. How will the damage be repaired??

12. Please state the details of the part (s) to be replaced (Please attach separate sheet)

13. Please provide estimated cost of repairs, pls. provide breakup of cost (parts & labour)

14. How did the damage occur(please attach Sketches & photographs

15. Please provide details of repairs:

a. Carried out in house YES NO

b. outside repairer, YES NO

c. Please give full particulars

16. Please give details of Manufacturers Warranty/ Guarantee

17. Details of loss or damage under other section (s) of the policy

MISCELLANEOUS DETAILS

18. Give details of other Insurance, if any, covering the present loss

19. Give details of previous Claims, if any, on the project

20. Do you wish to reinstate the Policy? YES NO

DECLARATIONS

I/We agree to provide any additional information to the Company, if required, in relation to the loss or damage. I/We, the above mentioned, do hereby, to the best of my/our knowledge and belief, warrant the truth of the foregoing statement(s) and document(s) in every respect, and I/We agree that if I/We have made, or in any further declaration the Company may require in respect of the said loss/damage, any false or fraudulent statement, or any suppression or concealment of any fact deemed material, my/our claim shall be absolutely forfeited, and the Policy shall be void without any refund of premium, and all rights to recover there under in respect of past or future loss/damage shall be forfeited.

Date: _____

Place: _____

Signature Of Insured: Name of Insured/Claimant:

Generali Central Insurance Company Limited (Formerly known as Future Generali India Insurance Company Limited) | Registered Office: Unit No. 801 & 802, 8th Floor, Tower C, Embassy 247 Park, LBS Marg, Vikhroli (West), Mumbai – 400083 | **IRDAI Regn. No.:** 132 | **CIN:** U66030MH2006PLC165287 | **Website:** <https://generalicentralinsurance.com> | **Email ID:** gcicare@generalicentral.com | **Toll-free Phone:** 1800 220 233 / 1860 500 3333/ 022 6783 7800