An ISO 9002 **Certified Company**



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Karachi Islamabad Faisalabad Lahore Multan Sialkot Gujranwala Peshawar

IGI GENERAL INSURANCE LIMITED

COMPUTER ALL RISKS CLAIM FORM

This form should be completed and returned to the Company immediately (The Company does not admit liability be the issue of this form)

Cla	im No		
1.	Name		
		Address of the client	
		erDate of incident	
4.	Brief description of item (including make, model and specification details)		
5.	Details of maintenance agreement		
6.	Particulars of failure including the cause of loss		
7.	If repairable, details of type and extent of repairs		
8.	If repair considered impractical, why?		
9.	If by theft:	a) Time and date	
		b) How committed	
		c) Has Police been notified	
		d) If so when and where	
		e) State results of police investigation, if any	
10.	Are you insu	ou insured against the present loss under any other policy?	
11.	Estimated new replacement value at the time of incident.		
12.	Amount Claimed.		
	I/We declare that the foregoing statement are true to the best of my/our knowledge and belief that the articles and property described on the other side hereof were lost/stolen or damaged under the circumstances above described, and that such articles and property belong to the persons named, no other person having any interest therein whether as Owner, Mortgagee or otherwise.		
	Date	Stamp & Signature of Authorized Officials	
	P.S. Please attach	copy of repairers estimate / diagnosis report.	