## Bajaj Allianz General Insurance Company Limited

Regd. Office & Head Office : GE Plaza, Airport Road, Yerawada, Pune - 411 006



Notification of Physical Loss or damage						
	CONTRAC	TOR'S PLANT AND MACH	INERY INSURAN	CE .		
(The issue of this form is not to be taken as an admission of Liability)						
Policy No.			Claim No. :			
Period of Insurance From D D M M Y Y To D D M M Y Y						
Insured						
Address						

1	(a) Full Description of Machinery Damaged	
	(b) Item Number in the Policy Schedule	
	(c) Its separate value.	
2	Date and time of loss	Date  D  M  M  Y  Y  Time :
3	Name of person /s if any, who witnessed the occurrence.	
4	Details of losses sustained.	
	1) To own property	
	2) To owner's surrounding property	
	3) To the Third Party	
5	Causes of Loss	

6	If the loss was due to AOG perils, please provide the relevant cuttings of news papers or local meterological department reports.	
7	If the loss is by theft / burglary, has the F. I. R. been filed ? If Yes, Provide the copy of the same. If not, state reasons for not filing the FIR.	Yes No
8	If the loss is due to Fire, has the Public Fire Brigade being informed ? If yes, please provide the copy of report.	Yes No
9	State the action taken for minimising the loss.	
10	At which site of the project and for what purpose the machinery was used at the time of breakdown.	
11	Have the repairs been put in hand ? If so, give name and address of repairers.	Yes No
12	Was/Were the damaged machine(s), being operated by the trained person.(please provide the name and his proficiency certificate.	Yes No
13	(a) State nature of repairs and particulars of replacement of any parts required.	
	<ul><li>(b) Estimate of the cost of repairs/ replacement.</li><li>(any major repairs to be executed only with prior consent and approval of the company</li></ul>	Rs.
14	State the salvage value on the damaged Item.	Rs.
15	Where can be the damaged items be inspected	
16	Are there any other insurance effected by you or any other person covering the loss sustained or any part there of ?	Yes No
17	Please give any other particulars relevant to the damage	

I / We declare that the foregoing particulars, are true and correct to the best of my / our knowledge.

Place :

Date: D D M M Y Y

Signature

(This form is to be signed only by an authorised representative of the insured.)