

BUSINESS VALUE ACCOUNT

Insurance Claim Form

Name: _____
CNIC: _____
Address: _____
Silkbank A/C Number: _____
Telephone Number: _____

Date: _____

Claim for

- ☐ Over-the-Counter Cash Withdrawal
☐ ATM Cash Withdrawal
☐ Business Inventory

For Business Contents (Comprehensive Fire/Natural Perils)

1. When did the fire/damage take place? Date: _____ Time: _____
2. Situation of inventory destroyed/lost: _____
3. How was the premises occupied at the time of the fire/loss? _____
4. What was the cause of the fire/loss and under what circumstances did it occur? _____

☐ Fire ☐ Terrorism/Explosion ☐ Atmospheric Disturbance ☐ Riots ☐ Malicious Damage ☐ Earthquakes ☐ Others _____

5. Is the claimant the sole owner of the inventory damaged/lost? ☐ Yes ☐ No

If no, state the full particulars of any other interest: _____

6. Has there been any previous fire/loss at the premises, or any other premises owned by the insured?

State full particulars: _____

7. Was there any existing insurance at the time of fire/loss by the claimant or any other persons on the said inventory with any other company? If yes, state particulars: _____

List of required documents:

- ☐ Claim Form
☐ Police Report
☐ Detailed Statement
☐ CNIC Copy
☐ Fire Brigade's Report in case of loss arising out of fire
☐ Any Other Documents

Declaration

I/We _____ now residing at _____

do hereby declare that the above is a full, true and accurate statement, and I/we further declare that the Articles mentioned on the reverse side, being my/our property, and insured under the above-named Policy or Policies were accidentally destroyed or damaged, without any design or procurement on my/our part, by the aforesaid Fire/Loss according to the extent and values annexed, whereof I/we claim from

Saudi Pak Insurance Company Limited, the sum of Rs. _____ the amount thereof.

I/We solemnly declare that I/we have in no manner nor by fraud nor wilful misrepresentation nor non-disclosure sought unjustly to benefit by the said Fire/Loss and that this solemn declaration is made by me/us conscientiously believing the same to be true.

As witness my/our hand, this _____ day of _____ 20 ____

Taken and declared at

This _____ day of _____ in the

Year 20 _____ before me _____

Signature of Claimant _____
Seal (in case of a company)

Detailed Statement of Property Destroyed or Damaged by Fire and Insured Under

Policy No.: _____ of Saudi Pak Insurance Company Limited.

Policy No.	Description	Value at the time of the fire of Articles damaged or destroyed	Value of salvage	Amount claimed after deducting value of salvage

For Official Use Only

☐ Claim Form ☐ Police Report ☐ Detailed Statement ☐ CNIC Copy ☐ Any Other Documents _____

☐ Fire Brigade's Report in case of loss arising out of fire

For ATM/Over-the-Counter Cash Insurance

1. When did the loss occur? Date: _____ Time: _____

2. Where did the loss occur? _____

3. The money in transit and amount of loss: _____

4. Mode and manner of carrying money: _____

5. Full particulars of loss:

 i) Cash: _____

 ii) Other Valuables: _____

6. Were there any witnesses to the loss? ☐ Yes ☐ No

 If yes, please provide contact details: _____

List of required documents:

- ☐ Claim Form
- ☐ Police Report
- ☐ CNIC Copy
- ☐ Bank Statement
- ☐ ATM Receipt

Declaration

We do hereby affirm and declare that the above statements of facts are in all respects true and complete to the best of our knowledge and belief as we claim in respect thereof.

Supplied on: _____

Checked/Recorded by: _____

Claim No.: _____

Signature of Claimant: _____
(with rubber stamp)

For Official Use Only

☐ Claim Form ☐ Police Report ☐ ATM Receipt (If ATM Robbery) ☐ Bank Statement (If Over-the-Counter Robbery) ☐ Any Other Documents (Specified by the Bank)