

## Reliance Travel Care Insurance Policy

### Claim Form D

Please return the completed form within fourteen days of the loss together with the relevant vouchers, documents etc.

#### Home Burglary

Address of the premises at which the loss occurred.

\_\_\_\_\_

How was the said premises occupied?

\_\_\_\_\_

Date of loss 

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Time of loss \_\_\_\_\_

When was the loss first discovered and by whom? \_\_\_\_\_

Please state as to how the entry to/ exit from the premises effected? \_\_\_\_\_

Please specify the portion of the premises which was affected by the entry or exit? \_\_\_\_\_

Please provide details as to how the loss occurred. \_\_\_\_\_

\_\_\_\_\_

Has a complaint been lodged with the Police Authorities?  Yes  No

If yes,

a) Who lodged the complaint with the Police Authorities? \_\_\_\_\_

b) Which Police station was the complaint lodged at? \_\_\_\_\_

c) When was the complaint lodged? Please attach a copy of the Police complaint. \_\_\_\_\_

(Note : If this is not done, this may be done immediately and a copy thereof be submitted)

Please state the total value of property upon the premises at the time of loss. \_\_\_\_\_

\_\_\_\_\_

Please state whether there the property is covered under a Fire and Special Perils Policy?  Yes  No

If yes,

a. Please state the Sum Insured applicable \_\_\_\_\_

b. Name(s) of the Insurer (s). \_\_\_\_\_

Is there any other Insurance against the present loss under any other Policy ?  Yes  No

If yes, please give full particulars. \_\_\_\_\_

I/We hereby declare that the foregoing particulars are true and correct in every respect and that the articles and property described belong to the person/s named, no other person having any interest therein, whether as Owner, Mortgagee, Trustee or otherwise.

Details of Articles Stolen. (In case of insufficient space, please attach a separate sheet.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature of Insured Person

Date \_\_\_\_\_

Place \_\_\_\_\_