

# THIRD-PARTY LONG-TERM TWO-WHEELER INSURANCE POLICY - 5 YEARS - CLAIM FORM

Issue Of This Claim Form Is Not To Be Taken As An Admission Of Liability

- The claim form is to be duly filled and signed by the insured.
- All facts and statements must be factual not influenced or biased in any favour.
- The damaged vehicle shall not be left unattended without proper precaution being taken to prevent

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		-				
		-				
						_
From			То			
	•					
mant						
*Address		City:				Pin code:
	Phone No. Email Id:		Mobile No.			
ccount)						
etails - Bank Name				Branch		
			A/c No.			
			PAN No.			
			Aadhar N	lo.		
Date of Accident			Time of Accident:		t:	am/pm
Own Damage		ge	Theft			Third Party
	In case, the	claim has trigger	ed in a	ny of the a	dd-on. Please	provide the details.
	From	From  City: Phone No. Email Id:  Ccount)  ame  Own Damae	From  City:  Phone No. Email Id:  Ccount)  ame  Own Damage	From To  mant  City: Sta  Phone No. Mo Email Id:  ccount)  ame  Time  Own Damage  Th	Time of Acciden  To  To  To  To  To  To  To  To  To  T	From To  mant  City: State:  Phone No. Mobile No. Email Id:  ccount)  ame Branch  A/c No.  PAN No.  Aadhar No.  Time of Accident:



Short Description of Accident										
Police Report Details, if any										
DRIVER DETAILS AT THE TIM	NE OF ACCID	ENT								
Name		Age								
Driver License No.		Name of RT0			Learner's License	Yes/No				
Co-passenger details		•								
APPLICABLE FOR COMMERC	CIAL VEHICL	E								
No. of passengers carried at the time of Accident	G R Number & Date									
Permit No.		Permit Is:	suing A	uthority						
Permit Valid Up to		Permit Valid for (Area)								
Fitness Granting Authority		Fitness V	alid up							
APPLICABLE FOR THIRD PA	RTY PROPER	RTY DAMA	GE OR	INJURY	•					
Name of Third party / occupants/driver/property	Contact No	Type of Name of the hosp where admitted damage		Name of the hospital where admitted	Any Legal / Court Notice Received					
I HEREBY DECLARE HAVING	SUBMITTED	THE FOL	LOWIN	G DOCUMENTS	•					
□Copy of Policy/Cover Note	□Copy of RC	Book	Сору о	of Driving License	□Estimate c	of repairs				
□Copy of Fitness Certificate □Copy of Permit □Copy of FIR □G.R Form										
DECLARATION										
I/We here by declare that the event above information or a fortified. I/We also agree to p	ny part there	of is found	l incorr	ect, I/We agree that	all rights un	ief and knowledge .ln der the policy will be				
						Insured Signature				
Date:										



# **List of Documents Required**

- Claim Intimation
- Policy Copy
- Claim form
- Copy of RC book
- Copy of Driving License
- Estimate
- Photos
- Survey Report
- Survey Fees Bills
- Supplementary Report / Re-inspection report
- Final repair invoice and receipt / Satisfaction voucher for cashless payment

## **Addition Documents For Commercial Vehicle**

- Fitness Certificate
- Copy of FIR
- Permit
- Load Challan

#### **Theft Claims**

- Claim Intimation
- Original Policy
- Claim Form
- Original Registration certificate
- FIR
- Original Set of Keys
- Original Sales Invoice & Tax Receipt
- Intimation to RTO ( to inform RTO that the vehicle is stolen and not to transfer)
- Final Report
- Transfer papers
- Indemnity Bond
- Subrogation Letter

## **NEFT Payment**

Cancelled Cheque for NEFT Payment

# AML Documents - for claims above One Lakh Rupees

- Photo Identity Proof
- Passport size photo (Individual) Mandatory
- Pan card Mandatory
- Passport / Driving License / voters ID Card
- Proof of Address (last six month)
- Telephone Bill / Electricity Bill / Bank Statement / Ration Card Memorandum of understanding / Registration of Company – (Regd. Company / firm / establishment)

The list given is indicative in nature. Further additional documents may be called for depending on the nature of the claim.



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