#### Liberty Videocon General Insurance Company Limited

10th Floor, Tower A, Peninsula Business Park,
Ganpatrao Kadam Marg, Lower Parel, Mumbai - 400 013
Phone: +91 22 6700 1313 Fax: +91 22 6700 1606
Email: care@libertyvideocon.com



# **CLAIM FORM BURGLARY INSURANCE**

## ISSUANCE OF THIS CLAIM FORM IS NOT TO BE TAKEN AS AN ADMISSION OF LIABILITY

## Important Instructions

- a. Claim Form to be filled in capital letters and signed by the Insured.
- b. Please submit the documents as mentioned at the end of this form\*.
  c. Please do not leave any column unanswered. Mention "N/A", if not applicable.
- d. Take all reasonable precautions to prevent / reduce further loss, damage or liability.
- e. Preserve any damaged or defective property or parts for inspection by the surveyor.
- f. Hold liable in writing any third parties believed to have caused loss / damage.
- g. If any detail or information is not readily available, please do not delay the dispatch of this form.

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Call Toll Free No : 1800 266 5844 Email : care@libertyvideocon.com

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## INDICATIVE LIST OF DOCUMENTS REQUIRED FOR CLAIM SETTLEMENT

- 1. Claim Form
- 2. First Information Report and Final Police Report
- 3. Books of Accounts and Inventory Register
- 4. A list of all stolen and damaged items along with its intrinsic value and amount damage sustained
- 5. Letter of Indemnity
- 6. No Objection Certificate from the financier if claim is to be settled in your favour
- 7. Claim Bill with supporting documents (Original Repair / Replacement Bills)

<sup>\*</sup> Additional documents required by insurer if any, will be intimated to you as and when required