

BAGGAGE INSURANCE CLAIM FORM

(The issuance of this form does not imply admission of liability.)

CLAIM NO: _____**POLICY NO:** _____

1. Name and address of the Insured (in full):	
2. State the place/ location where loss occurred.	
3. (a) Date and time of loss: (b). When discovered and by whom?	
4. (a) Give brief details of how exactly the loss occurred. (b). Specify overleaf the articles stolen and items damaged including the estimated amount of loss	
5. Has a complaint been lodged with the Police? If so, by whom and when and at which Police Station? (Attach a copy of the Police complaint.) (If not, this may be done immediately and a copy thereof furnished to the Company with reasons for the delay)	
6. Is any body suspected for loss? If so, state full details.	
7. Is the Insured the sole owner of the property lost or damaged? If not, details of ownership.	
8. State the total value of property in the baggage at the time of loss.	
9. Is there any other Insurance against the present loss under any other Policy? If so, give full particulars.	

