**Property All Risks Claim Notice**

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| --- | --- | --- | --- | --- |
| Policy No. | |  | Date of Occurrence |  |
| Insurance Period | |  | Place of Occurrence |  |
| Sum of Insured | |  | Item Damaged |  |
|  | Cause of Loss |  | | |
|  | Loss Items & Sue and Labor |  | | |
| Estimated Loss | | | | |
| I/We declare that the statements made are true to the best of my/our knowledge and belief and I/we claim the amount above in respect of the items mentioned.  Insured(Seal)  Date : Contact person: Tel.: | | | | |