



PIONEER INSURANCE COMPANY LIMITED
CLAIMS DEPARTMENT
HEAD OFFICE: Rangs Babylonia (5th Floor), 246, Bir Uttam Mir Sawkat
Sarak. Teigaon. Dhaka-1208

IAR

CLAIM FORM **CLAIM NO. PIONEER/HO/FCL(IAR)-**

Name of Insured:
Name of Bank:
Policy No.: **Period: From:** **To:**

When did the Fire / Riot Fire / Riot Strike Damage / Cyclone / Flood / Earthquake etc. took place ? At about AM. / PM.
 On the day of 201

What were the risks covered under the Policy ? Make (✓) Whichever is applicable.

Fire	Flood	Cyclone	Earthquake	Breakdown
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What was the cause of the Fire /Riot Fire/ Riot Strike Damage or under what circumstances did the loss occur?

What was the situation of the property damaged or destroyed at the time ?

What was the construction of the affected premises at the time?

(a) Walls
 (b) Roof

How were the premises occupied at the time ?

Dose the Policy give a correct description of the property in all respect as it existed immediately before the accident

Has any new element of risk been introduced since proposing the Insurance ?

Have all the terms-conditions and warranties of the Policy been complied with in every respect ?

How is the claimant interested in the property damaged or destroyed ? Mark (✓) whichever is applicable.

Proprietor	Joint Proprietor	Lesser	Lessee
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mortgagors	Mortgagees	Bailees	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Whether there are any other insurance in force against the risks insured on the said property at the time of fire or any other risk insured hereby whether effected by the claimant or any other person, with any other insurer ? If so, please state full particulars.	Name of the Insurer	Policy No.	Amount of Insurance

I/We now residing at do hereby declare that the above is a full, true and accurate statement, and I/We further declare that the Articles mentioned on the reverse side being my/our property, and insured under the above named policy or policies were accidentally destroyed or damaged, without any design or procurement on my/our part, by the aforesaid Fire/Flood/Cyclone/.....and/or according to the extent and values annexed, wherefore I/We claim from PIONEER INSURANCE CO. LTD. the sum of Tk..... the amount thereof.

I/We solemnly declare that I/We have in no manner, nor by any fraud, nor willful misrepresent, nor nondisclosure sought unjustly to benefit by the said Fire/Flood/Cyclone/..... and/or that this solemn declaration is made by me/us conscientiously believing the same to be true.

Dated at on the day of 201

Signature of the Mortgagees Bank.

Signature of the Claimant

Detailed Statement of Property Destroyed or Damaged

Policy No.	Item No. Of the Policies	Description of Property	Sum Insured	Value at risk at the time	Value of Salvage	Amount claimed after deduction value of Salvage	Cost of repairs

TO BE COMPLETED IF MORE THAN ONE POLICY

POLICY NO.	AMOUNT	PROPERTY COVERED	RISK AGAINST WHICH INSURED

Signature of the Claimant
Full Name
Date

Date

Signature of the Mortgagee Bank
Full Name
Designation

A Fire Policy being a contract of INDEMNITY only. All claims must be based upon the actual value of the goods at the time of the fire, no trade profit what ever being included in the claim.