



युनाइटेड इंडिया इश्यूरेन्स कं. लिमिटेड
UNITED INDIA INSURANCE CO. LTD.

DIVISIONAL OFFICE , II nd FLOOR, PARK HOUSE, ROUND NORTH, THRISSUR-680 001.(2331145, 2331290)

DM direct-(0487)2331152 Fax – 0487 – 2321291

E-mail : apmuralidharan@uic.co.in

**PERSONAL ACCIDENT INSURANCE
CLAIM FORM**

1. Name of the diseased woman.	
2.Details of Mahila Savings Bank Account with The South Indian Bank Ltd.	SB Account Number : RD Account Number : Branch : Date of RD Account Opening :
3. Address of the insured	Plot No/Door No.
	Building name
	Road
	Area
	City
	Pin code
State	
4. Profession or occupation	
5	a) Name of the Nominee / Claimant
	b) Relation ship with the Insured
6.	a) Date of the Accident
	b) Time of the Accident
	c) Place of the Accident
	d) Date of Death due to Accident
7.	How did the Accident occur?
8.	Was the accident reported to the police?
	a) If yes give the address of the police station
	b) If no give the reason

9.	First Information Report (FIR)- Number & Date	
10.	a) Name & Address of the hospital where the person was admitted immediately after the accident	
	b) Name & Address of the hospital where the post-mortem was conducted	
11.	Name and Address of the Witness	

I/We hereby declare that the foregoing statements are made by myself and are true in all respects and I/We have not attempted to conceal from the company anything with which it ought to be made acquainted. I/We agree that if I/We have made or in any further declaration the company may require, shall make any false or fraudulent statement or any suppression, concealment or untrue averment whatever, the policy shall be void and My / Our right to compensation forfeited. I /We am/are willing, if required, to make a Statutory Declaration before a Court of the truth of the whole of the foregoing statement or any other statement I/We may make in connection with this claim.

Witness:

Nominee / Claimant

Signature :

Signature :

Name :

Name :

Date :

Date :

Check List Of Documents To Be Enclosed : *Copy of original claim intimation, FIR/Scene Mahassar/Inquest Report, Death certificate, Post Mortem Report. Legal heir ship certificate if nominee not given.*