

SALAM TAKAFUL INSURANCE COMPANY LIMITED

65, IBRAHIM TAIWO ROAD, KANO

Website: www.salamtakafulinsurance.com

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ALL RISK TAKAFUL CLAIM FORM

Instruction: Use (✓) where appropriate.

Special Notice: i- By the conditions the policy is rendered void if any claim be fraudulent or Intentionally exaggerated. Or If any false statement or declaration be made in support of it.

ii- It is therefore important that this form should be completed with great care.

PART A: POLICY DETAILS

POLICY NO:

PART B: PARTICIPANT DETAILS

FULLNAME:

ADDRESS:

TELEPHONE:

PART C: RISK DETAILS

i- Describe the full circumstances of the loss, damage or theft stating DATE & TIME;

Time: __: __ am/pm Date: __/__/____

ii- Do you suspect any person in connection therewith? YES NO

If yes, give details:

iii- Date Police was advised and address of Station;

(a) Date: __/__/____

(b) Address:

iv- What other steps have been taken to recover the property?

Authorized and Regulated by:



Member of:



EXTENT OF DAMAGE

v- Is the item(s) Repairable? YES NO

vi- State the Cost of Repairs/Replacement of lost Data

vii- State the name and of the Address of the Vendor

NAME:

ADDRESS:

PART D: OTHER TAKAFUL/INSURANCE DETAILS

Are there any other insurance/Takaful operators against loss, damage or theft on the same property? YES NO

If YES, please give full details below:

PART E: FULL DETAILS OF ITEMS LOST OR STOLEN OR DAMAGED

No. of Articles	FULL DESCRIPTION	Name and Address of Seller or Presenter	Date of purchase or Presentatio	Cost paid	Amount claimed allowing for Depreciation
				₦	

Authorized and Regulated by:



Member of:



PART F: DECLARATION

I hereby declare that the within mentioned property belonging to me and covered under the said Policy was lost, damaged or stolen in the circumstances stated above and that in consequence thereof a claim is hereby made for the sums severally state within; and I further declared that no other person excepthas any interest in the said property.

Witness my hand this day of20

Witness Signature

N.B This Statement of claim should be completed and forwarded to the company.

The Participant **MUST** at once take every practical step that may lead to the recovery of the property. The Police must be advised immediately; and in the event of theft, any suspicious as to the party implicated must also be communicated to the company without delay. If the loss occurred in a Shop, Hotel, Restaurant, or Public conveyance, or the likes, particulars must be reported to the responsible management as soon as practicable.

INSTRUCTION REGARDING CLAIMS

IF ANY OF THE COVERED PROPERTY, THE SUBJECT OF THIS CLAIM IS RECOVERED EITHER BEFORE OR AFTER INDEMNITY HAS BEEN PROVIDED UNDER WITHIN NAMED POLICY THE COMPANY MUST BE NOTIFIED IMMEDIATELY

Authorized and Regulated by:



Member of:

