

SALAM TAKAFUL INSURANCE COMPANY LIMITED

65, IBRAHIM TAIWO ROAD, KANO

Website: www.salamtakafulinsurance.com

Email: info@salamtakafulinsurance.com



GOODS IN TRANSIT CLAIM FORM

Instruction: Use (✓) where appropriate.

NOTE: Please answer questions fully and return this form.

PART A: POLICY DETAILS

POLICY NO:

Date of payment of last contribution: __/__/____ format dd/mm/yyyy

PART B: PARTICIPANT DETAILS

FULLNAME:

TELEPHONE:

OCCUPATION/
BUSINESS :

PART C: RISK DETAILS

i- Were the goods lost or were they damaged? LOST DAMAGED

ii- Date and Time of loss or damage: Time: __: __ am/pm format HH:MM Date: __/__/____ format dd/mm/yyyy

iii- Place:

iv- By whom reported?

v- How did loss/damage occur?

IF GOODS WERE CARRIED IN OWN VEHICLE OR VEHICLE OPERATED BY YOU, STATE;

vi- Reg. No. of Vehicle:

vii- Make and type:

viii- Value of load:

ix- If vehicle left unattended were all doors and windows secured? YES NO

x- Was any receipt obtained? (A) on collection YES NO
(If so, please forward them) (B) on delivery YES NO

Authorized and Regulated by:



Member of:



PART D: OTHER DETAILS

Date of notification in writing to person or persons responsible for transit or storage:

Conditions of Carriage: As most Carriers lay down to their Conditions time limits for the notification of loss or damage, and advice of the details of such loss or damage.

It is particularly requested that prompt notification is made to the Carrier concerned.

IN RESPECT OF PROPERTY LOST

i- When did you advise the Police and where?

ii- What other steps have you taken to trace it?

IN RESPECT OF PROPERTY DAMAGED

i- Where can the damaged goods be inspected?

ii- Was all the property claimed for, your own? YES NO

If not give details of ownership or interest;

PART E: OTHER TAKAFUL/INSURANCE DETAILS

i- Are there any other effective policies over the property concerned? YES NO

If yes, state particulars;

ii- Has the Current contribution been paid? YES NO

If yes,

(a) When was it paid?

(b) To whom was it paid?

N.B. THESE QUESTIONS MUST BE FULLY ANSWERED

Authorized and Regulated by:



Member of:



STATEMENT OF CLAIM

N.B. (1) The Amount to be claimed on any article is limited to the actual intrinsic value at the time of the loss the amount of damage should be stated.

N.B. (2) Receipt obtained at time of purchase of the under mentioned articles should be attached wherever possible for inspection and subsequent return.

PART E: DECLARATION

I hereby declare that the property claimed for particulars of which are given above, has been lost or damaged and that all the statements on this form are, to the best of my knowledge and belief, correct.

Signature of Participant:

Date: 20.....

NOTE:

DISCOVERY OF LOSS: The participant must promptly take all practical steps to trace the property and secure conviction of guilty party and parties.

NOTIFICATION OF POLICE: The Police Authorities must be notified of loss without delay.

THE COMPANY DOES NOT ADMIT LIABILITY BY THE ISSUE OF THIS FORM

Authorized and Regulated by:



Member of:

