HDFC ERGO General Insurance Company Limited

Claim Form

HDFC ERGO FARM YIELD INSURANCE POLICY

The issue of this form is not to be taken as an admission of Liability

1.	DETAILS OF INSURED		
(i)	Policy No:		
(ii)	Policy Start Date : DD/MM/YY		Policy End Date : DD/MM/YY
(iii)	Insured 's Name		
(iv)	Insured's Address		
(v)	Contact Nos.		
(vi)	Limits of Indemnity under the Policy		
(vii)	Date of Loss		
2.	**Details of the Property/ Crop covered**: Details of the activity carried out (applicable in case of non-agricultural economic activity): Details of Loss/ damage : Weather or any other conditions on account of which the damage is reported:		

I/We hereby agree, affirm and declare that:

a) The statements/information given/stated by me/us in this incident reporting form are true, correct and complete.

b) No material information which is relevant to the processing of the claim or which in any manner has a bearing on the claim has been with held or not disclosed.

c) If I/we have given/made any false or fraudulent statement/information, or suppressed or concealed or in any manner failed to disclose material information, the policy shall be void and that I/We shall not be entitled to all/any rights to recover thereunder in respect of any or all claims, past, present or future.

d) The receipt of this incident reporting form/other supporting/related documents does not constitute or be deemed to constitute an agreement by the Company of the claim and the Company reserves the right to process or reject or require further/additional information in respect of the claim.

e) I/We, the above named, do hereby, to the best of my/our knowledge and belief, warrant the truth of the foregoing statement in every respect, and I/We agree if I/We have made require respect of the loss/damages, shall make any false or fraudulent statement, or any suppression or concealment, the policy shall be void and all rights to recover there under in respect of loss/damages shall be forfeited

Place: _____

Date: _____   Signature _____

JUN 2022