

BURGLARY INSURANCE CLAIM FORM



(THE ISSUANCE OF THIS FORM IS NOT TO BE TAKEN AS AN ADMISSION OF LIABILITY BY THE INSURER.)

1. Name(s) and address(es) of Insured(s)	
Telephone No.	

	Telephone No.	Telephone No.
2-	Address of the premise where loss occurred	
3-	At what date and hour was the Theft committed?	
	If the premises were forcibly entered, how precisely was entrance effected?	
	If the premises were not been forcibly entered, what evidences are there to prove the theft?	
	(a) From what part of the premises was the property taken?	
	(b) When was the stolen property last seen prior to the Theft?	
	(c) Do you suspect any one?	
4-	(a) Were the premises inhabited? If not, upon what date they were last inhabited prior to the theft?	
5-	(a) Have you informed the Police? If so, on what date and at which Police Station?	
	(b) Has there been any development? (attach police report)	

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Damaan Islamic Insurance Company – Beema (Q.P.S.C)

CR: 43652 Tel (+974) 44050555 Fax: (+974) 44050505

P.O. Box 11068 Lusail – Qatar, Paid up Capital QR 200,000,000

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6. List of all Stolen and Damaged Property(Attach additional sheets if required)				
Description of property/articles.	To whom it belonged.	Purchase cost. (to be supported by receipts)	Deduction for wear and tear.	Amount claimed.

7-	What was the estimated value of the total contents in the premises at the time of the Theft?	
8-	Give brief particulars of previous loss sustained by Fire or by Theft, if any.	
9-	Particulars of any other insurance(s) against theft upon the same property.	

The undersigned Insured does hereby declare that the statements made herein are in all respect true and complete. Also he undertakes to refund the amount/(s) received in the event of all or any of the lost articles claimed being recovered.

Signature and Stamp of the Insured:	Date:
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