



THE NEW INDIA ASSURANCE COMPANY LIMITED

Regd. Office: New India Building, 87, Mahatma Gandhi Road, Fort, Mumbai-400001
Mobile & Tablets Handset Insurance Claim Form

*Please note: - The issue of this claim form is not to be taken as an admission of liability. All columns need to be filled up in detail in all respect.
 Note: (*) and (#) mark field implies mandatory fields, need to be filled in detail compulsorily or else the document shall be treated as incomplete.
 In case of incomplete document/details claim will be void.*

DETAILS OF THE INSURED/BENEFICIARY

*Store Name:	LOT Mobiles Private Limited's certified retailers or distributors.		Store Location	
*Name of Customer/Purchaser: (please write complete name including father/ mother/ spouse name, etc as applicable)			Date of Purchase	
			DD/MM/YY	
1:*Address of Customer/Purchaser: (Note - Provide your reachable or present address on which any correspondence if required can be sent.	*Address Line			
			*City	
Pin Code	*Address Line 2:		*State:	

CONTACT DETAILS OF CLAIMANT/BENEFICIARY

Landline No:	STD code		Any other relevant information:
*#Currently in use reachable 10 digit Mobile Contact no:			
Alternative contact no:			
Email Id:			
*# - Provide your currently in use reachable 10 digit Mobile contact no. which will be used for all your claim & information related communication purpose.			

EQUIPMENT DETAILS:

*Make:		*Model:	
*Purchase Invoice No:		*Purchase Date:	DD/MM/YYYY
*IMEI no / Serial no (as mentioned in your INVOICE/BOX): 1)		2)	
Type of Equipment:(Handset /Tablet)			

DETAILS OF LOSS

Please enter relevant information according to the nature of your claim i.e. (Theft/Burglary/ Damage)

*Date of Loss/Damage:DD/MM/YYYY	Time of loss:	Is there any other insurance cover for this equipment, if yes then please provide entire detail:
*Type of loss:	Theft/Damage (strike off whichever not applicable)	
*Brief description of incident of loss: (If the space is insufficient use a separate sheet & attach)		
*Estimate of loss:INR:		
Provide intimation number, if reported through web or call:		

***To be filled in case of Theft claims**

*Police Station, where the matter have been reported:		*Police Reference No:	
*10 digit Mobile number used at the time of loss: (*Applicable only for handset)			
Type of SIM tariff (Prepaid/ Postpaid connection): (*Applicable only for handset)		*SIM Network Service	
Letter for barring SIM services given to Network Provider (YES/NO): (*Applicable only for handset)	If YES Please give date of submission:	DD/MM/YYYY	

Declaration

I/We agree to provide additional information to the company, if required. I/We the above mentioned, do hereby, to the best of my/our knowledge and belief, warrant the truth of the foregoing statement in every respect & if I/We have made, or in any further declaration the company may require in respect of the said loss, 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 reimbursement shall be forfeited.

Date:

Place:

Signature of Insured Person/Beneficiary

Attach a copy of Photo ID - cum - signature proof



Declaration Form – Damage Claim

Date: / / 20...

From,
Mr. / Ms. _____ (Claimant Name)

Address Line 1:

Address Line 2:

Street Name:

City/District:

Pin code:

State:

To,
The New India Assurance Co. Ltd
87, M. G. Road, Fort, Mumbai – 400001

I/We Mr. / Ms. would hereby like to inform that I/We had purchased the insured equipment from LOT Mobiles Private Limited's certified retailers or distributors vide Invoice No..... Dated...../...../20.....

Type of Equipment : (Handset / Tablet) _____

*Bearing IMEI / Serial No.1) _____

*Bearing IMEI No.2) _____ . (*Applicable only for Mobile/Tablet with dual sim)

Make & Model No. as _____ and the said equipment has been damaged on date/...../20....., detailed description of loss is as mentioned below.

Detail Description of Incidence of loss/damage: _____

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In connection to the aforementioned loss, I would hereby like to assign, transfer my authority to The New India Assurance Co. Ltd, 87, M.G. Road, Fort, Mumbai – 400001 for the said equipment. I/We agree to submit the salvage in case the claim is approved for total loss.

I/We have read all the above mentioned information and I accept the same in totality and the same are true to the best of my/our knowledge. I/We hereby abide the terms and conditions of the policy.

Thanking you,

Name & Signature of the Claimant/Insured:

Claim Document Checklist – (For Damage Claims)

Want to know about Claim Document Checklist –

It's pretty hard to remember what to do after the initial shock and surprise after losing your Equipment If you are involved in such an incident, a checklist is to help ease your mind if you are involved in a loss, follow these tips to make sure you are prepared. Please note all the following documents need to be submitted to initiate the claim procedure with insurance company & we “UIBSPL” service provider will assist you to put forward all your claim documents.

- 1) Claim Form.
- 2) Declaration Form.
- 3) Repair Estimate.
- 4) Original Purchase Invoice
- 5) A copy of Claimant and SIM owner, photo cum Signature ID proof.
- 6) If the equipment is purchased by Company, a letter on companies' letter head confirming authorized person/user.
- 7) NEFT Form (Bank Account Details/IFSC Code) along with one cancelled cheque.

These documents can also be downloaded from webpage <http://lot.euniversal.co.in>

Note: Unless requested, do not send your Mobile accessories like Battery, Earphone, charger, Data cable, Mobile Box etc. If lost or misuse, we do not undertake any responsibility.

Kindly fill all the details in true & correct manner with regards to your claim for hassle free claim experience and process. Submit the required original documents **within 15 days** from the date of registration of your claim.

Please note that your claim documents will be forwarded by our team only when it is complete in all manners as required by Insurance Company

All original claim documents will be retained by Insurance Company & hence it is advisable to maintain a copy for your record.

For any assistance do call us on 022 4910 7910 or send an SMS as UIBSUPPORT (Space) LOT (Space)<your 10 digit mobile number> to 56767 e.g. UIBSUPPORT LOT 1234567890 or write us at lot.support@universalinsurance.co.in and we shall be more than happy to assist you.

