

UNITED INDIA INSURANCE COMPANY LIMITED (Regd. & Head Office: 24 Whites Road, Chennai-600 014.

Notification of Loss or Damage for Deterioration in Cold Storage Insurance Claim Form
The issuing of this form is not an admission of liability by the Company. All qustions must be fully answered.

1. Name			
2. Address			
3. I D Card No			
4. Business/Occupation			
5. Telephone Number			
6. Telefax Number			
7. VAT Registration No			
8.VAT status			
9. Policy Number			
10.Name of chief Engineer	or Plant Manager		
11. Address of Plant			
12.Age of Plant		_	
2.When did the loss or dar	nage occur? Date _		
3. Name and Address of s	pecialist surveyor		
4. Deterioration loss detail			
Cold storage (specify)	Types of Goods Spoilt	Quantity	Value

Cold storage (specify)	Types of Goods Spoilt	Quantity	Value
Cold storage (specify)	Types of Goods sold as a consequence of the loss event	Quantity	Value
damage for Machinery Ins Please attach copy of the	achinery damage, please at surance'. 'Monthly Declaration' for and cause of the deteriorat	the preceding month.	
6. Is stand by equipn If so, Please sta	nent available to minimize I Ite	loss of stock?	
Can goods be t	ransported to other cold st	orage houses?	
If so, please state	e types and quantities		
What other action	ons is being taken to minim	nise the loss?	

7. What are the estimated loss ?					
8. Any c	other relevant informa	ation			
_		eclares to have answered the above questions conscientiously and responsible for the correctness and completeness of his statement			
DATE	SIGNATURE				