



UNITED INDIA INSURANCE COMPANY LIMITED
BLOOD STOCK (RACE HORSE) - CLAIM FORM

ISSUING OFFICE

- Note:**
1. The issue of this claim form is in no way an admission of liability.
 2. All questions should be answered in full - Ticks or dash will not suffice.
 3. The attached Certificate must also be completed by the Insured's Veterinary Surgeon.
 4. If a conclusive opinion as to the cause of death cannot be given, a Post-Mortem should be carried out (free of expenses to the Company.)

POLICY NO.

CLAIM NO.

1. a) Name of Insured b) Address c) Occupation	
2. Give below particulars of the Animal claimed for: a) Name & Number b) Sex or Species c) Breed d) Colour & Distinctive mark e) Age f) Market Value	
3. a) Did the Animal die from accident or diseases? b) If accident, how and where did it occur? c) If from diseases, how do you account for it?	
4. Give the date, when the Animal a) was injured or first taken ill b) was first attended by Veterinary Surgeon c) was last seen by Veterinary Surgeon d) died or slaughtered	
5. a) Did the Animal die or was it slaughtered? b) If slaughtered, who authorised or directed.	
6. If the Animal had previously suffered from any accident or disease, state nature of it and name the Veterinary Surgeon who was in attendance.	
7. Was the Animal your property at the time of death, and how long had it been in your possession?	
8. How much did you pay for the Animal?	
9. How many Animals have you lost during the last year and from what causes?	
10. How many Animals of the same breed or class have you on your premises in addition to that now claimed for?	

11. Have you any other Insurance on your Blood stock? If so, give full particulars and state if the Animal how claimed for was covered thereby?	
12. If the accident was due to the negligence or a Third Party, give that person's name and address and state the nature of the negligence alleged.	
13. Was the Animal due for delivery? If so, a) When b) What was the date of last feeling?	

I / We hereby claim compensation for the loss of the Animal described, which was insured by the Company under its Policy No. I / We warrant that the foregoing answers are true in every respect, and that the conditions of my / her insurance have been complied with as required by the Company.

Date:

Signature

CERTIFICATE OF VETERINARY SURGEON (CLAIM)

(To be obtained by the Insured (free or expenses to the Company) from the Veterinary Surgeon who attended the Animal in respect of which the claim is made)

I hereby certify that I attended the Animal described below the property of Mr.
 .. of in consequence of
 (state nature of illness or accident) from to and that it died on

 The cause of death being

Name and Number	Sex or Species	Breed	Description of the dead animal as to Colour and Distinctive marks	Age	Market Value just prior to illness or accident causing death
1. How long had the Animal been ill before you were called in to attend it?					
2. Whether the Animal had been declared unfit or incapacitated to fulfil the functions or duties for which it was employed?					
3. Please state whether you examined the Animal when proposed for insurance to the Company. If not, can you state if the Animal was insured by the Company?					
4. If a Post-mortem was carried out, what did it reveal?					
5. If the Animal died from disease, how do you account for it?					
6. If from accident, how and where did it occur?					
7.					
8. Please state your General Remarks.					

Address:

Signature:

Date:

Registration No.

Qualification:

"NOTWITHSTANDING any thing herein stated to the contrary it is hereby declared and agreed that this Policy is extended to cover the unborn foal of the following Mare/s, certified pregnant at 180 days to the Stallion/s whose name/s is / are mentioned alongside for a sum stated against each against being still-born or dying from the commencement of this endorsement to the expiry of the Policy.

Name of the Mare	Name of the Stallion	Sum Insured on Mare Rs.	Sum Insured on unborn Foal Rs.

It is a condition precedent to liability that visual evidence by a Veterinary Surgeon of the existence of the expelled foetus at 180 days or later be produced when claiming for the loss of an unborn foal.

It is further declared and agreed that in case of twin foals, no compensation shall be payable unless both are lost"