



ITGI/FBY/06

IFFCO-TOKIO GENERAL INSURANCE CO. LTD.

Regd. Office: 34, Nehru Place, New Delhi - 110 019

Claim Form
Fasal Bima (micro) Yojna
IRDAN106P0001V01201112

Policy No.	
Certificate No.	
Name of Insured Person	
Address of Insured	
Phone No.	
Sum Insured	
Area under cultivation	
Crop under cultivation	
Landholding – whether owned or leased	<input type="checkbox"/> Own <input type="checkbox"/> Lease
If leased land, then name of owner	
Land record - Certified copies of documents attached	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you taken insurance of similar nature for the same land from some other Company?	
If Yes to above, then please provide details.	
Bank account No. & Name of the Bank	

I/ We declare that all information provided in this document is true and correct and I/We am/are aware that any incorrect/false information will render the claim not payable. I/We agree to provide documentation on request that may be required to verify the above given information.

Place:

Signature of Claimant /Financial Institution

Date:

Name of Claimant