

Natural Disaster Loss Insurance Claim Form

1. Policyholder Information

Full Name

Contact Address

Phone Number

Email Address

Policy Number

2. Incident Details

Type of Natural Disaster

--Select--

Date of Incident

Location of Incident

Description of Damage

3. Loss/Damage Details

Summary of Loss/Damage

Estimated Value of Loss (in local currency)

List of Supporting Documents Attached (e.g., photos, receipts)

4. Declaration & Signature

I hereby declare that the information provided is true and complete to the best of my knowledge.

Signature

Date

Important Notes

- Ensure all sections of the form are completed fully and accurately before submission.
- Attach all relevant supporting documents to avoid processing delays.
- False or misleading information may result in denial of your claim and possible legal action.
- Retain a copy of the completed form and supporting documents for your records.
- Contact your insurance provider for any clarification required regarding your claim.