

Asset Loss Inventory Sheet

Insurance Claim Format

Policy Holder Name	
Policy Number	
Date of Loss	
Location of Loss	
Claim Reference No.	

S.No	Description of Asset	Quantity	Purchase Date	Original Cost (INR)	Depreciation (%)	Claimed Value (INR)	Remarks
1							
2							
3							

Total Claimed Value (INR):	
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Declaration:
I hereby declare that all the above information and particulars given are true and correct to the best of my knowledge and belief.
Signature: _____ Date: _____

Important Notes:

- Please provide supporting documents such as purchase bills, photographs, and any relevant proofs.
- Mention accurate and complete details for faster claim processing.
- Ensure calculation of depreciation as per policy terms.
- False information can lead to claim rejection and legal consequences.
- It is advised to retain a copy of this sheet and all supporting documents for future reference.