ཨོ།འབྲུག་རྒྱལ་ཁྱིམ་སྤྱི་ལས་འཛིན་ཚན།

ROYAL INSURANCE CORPORATION OF BHUTAN LTD.

R I C B

"Your partner for growth and security"

Engineering Insurance Claim form

Insured's Name: _____

Address of the Contract site: _____

Policy No: _____

Give description and value of item lost or damaged	
When did the item in question arrive on site?	
When did the loss or damaged occur? (State date, exact time and place)	
How did the loss or damage occur and what was its probable cause?	
State the nature of damage sustained	
By who was the accident witnessed?	
State what repair or replacement are required and estimated cost thereof.	
Do you wish to carry out repairs yourselves? If not, state the firm to whom repair works to be entrusted	
Give salvage or scrap value of damaged parts	
Will it be necessary to:- • Work overtime or on Sundays/Hoildays in order to effect repairs • Dispatch replacement parts by "Express Delivery"	
State where damaged items can be inspected should corporation so desire	
Was the loss or damage caused by third party? Are they any rights of recovery from contractors, sub-contractors, manufacturers/suppliers? If so have you submitted a monetary claim on them?	
Are there any other insurance affected by you or any other person covering the property damaged or any parts thereof? If so give details?	
Other remarks, if any.	

I/We declare that the foregoing particulars are true and correct to the best of my/our knowledge.

Signature & Date

Thimphu Post Box # 315 **EPABX** + 975-2-321037, 321161, 323487, 322426, 324282, 325858, 328307, 323993, 252509, 252482
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