

Meghna Insurance Company Limited মেঘনা ইন্স্যুরেন্স কোম্পানি লিমিটেড

Head Office : Bainashilpa Bhaban (6th Floor) 73, Motijheel C/A, Dhaka-1000. TeL: + 88-02-9551 366, Fax : +88-02-9557796, E-mail :claims@micl.com.bd

ENGINEERING CLAIMS FORM

Claim No.:

Notification of loss or damage for MBD/DOS/EAR/CAR/CPM/EL/AR Insurance.

The issue of this form is not being taken as an admission of liability by the Insurers.

01	Policy/cover Note No.	:	
02	Name of Insured & Address	:	
03	Address of site	:	
04	Name of Supervising Engineer	:	
05	Nearest railway station	:	
06	Advisable approach route to site from station or otherwise	:	
07	Sum Insured	:	
08	Is the sum insured represents the replacement value?	:	
09	What is the depreciation cost, if the sum insured does not represent the replacement value.	:	
10	When did the loss/damage occur? (state date & exact time)	:	
11	Give name & address of witnesses to the occurrence.	:	
12	Which items & parts were damaged (Give your order number & manufacture's name, number, type, size, capacity, weight, pressure, etc.)	:	
13	Whether the machinery was in motion or stationery at the time of loss.	:	
14	How did the damage occur and what was its probable cause? (Please attach sketches, photos, STG continue under 15, if space not sufficient).	:	
15	Do the breakdown show any sign? Of faulty casting or faulty material or of previous repair.	:	
16	How will the damaged items to the repaired and by whom?	:	
17	Is replacement necessary	:	
18	Will any alteration or improvements be made to design, construction or material that repairs are carried out?	:	
19	What are the estimated costs for the repair of damage to machinery?	:	



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20	Is public liability involved? (Give de regarding property).	etails	:			
21	REMARKS		:			
	I / We declare that we have answe concealed and no fraudulent state	ered all t	the as	above questions truthf been made.	ully conscientiously and nothing h	as been
	Date at	this		-	day of	2017

Signature with rubber stamp of the mortgagee/contractor