



Insurance Claim Form



Cash Protector Plus

We have you covered!

Date: _____

Name: _____

CNIC No: _____ Card Type: _____

Address: _____

Account No: _____ Contact No: _____

Claim For

- Over-the-Counter Cash Withdrawal Snatching
- ATM Cash Withdrawal Snatching
- Personal/Accident Death

Claim Details

1. Full name of Insured: _____

2. When did the loss occur? *i. Date:* _____ *ii. Time:* _____

3. Amount of Loss (in PKR): _____

3. Where did the loss occur? *Location:* _____

Nearest landmark: _____

5. Kindly briefly narrate the incident:



List of Required Documents

1. Copy of CNIC
2. Claim Form duly completed, signed & stamped.
3. Original FIR (If claim is above PKR 30,000/-)
4. Transaction record as on date of snatching/armed hold-up
5. Copy of ATM Card (If available)
6. CCTV footage (If available)
7. Legal Heirship Certificate (in case of Accidental Death)
8. Death Certificate from Authorized Doctor/Hospital (in case of Accidental Death).
9. Relevant receipts/copy of cheque or counter copy/ carbon copy or any other relevant document.

****Any other document/ information required on case to case basis***

6. What action did you take?

Informed the police No Yes *Date:* _____ *Time:* _____

Informed EFU General Insurance Limited No Yes *Date:* _____ *Time:* _____

Declaration

I/We do hereby affirm that the above statements of facts are in all respects true and complete to the best of my/our knowledge and belief as I/we claim in respect thereof.

Signature of Claimant: _____

Checked by: _____

Submitted on: _____