

# **Sagarmatha Insurance Co. Ltd.**

“SURAKSHAN” Bhawan, Naxal ,Kathmandu, Nepal.

Tel: 977-1-4412367 Fax No.:977-1-4412378

E-MAIL: [sagarmatha@insurance.wlink.com.np](mailto:sagarmatha@insurance.wlink.com.np)

**(Engg . DEPT.Plant and Machinery)**

Claim No : \_\_\_\_\_

Policy No : \_\_\_\_\_

Name of insured : \_\_\_\_\_

Address : \_\_\_\_\_

Date /Place of Accident : \_\_\_\_\_

Time : \_\_\_\_\_

Period of Insurance : \_\_\_\_\_

Sum Insured : \_\_\_\_\_

Details of Contents of  
Damage Property/TP if any : \_\_\_\_\_

Estimated Loss : \_\_\_\_\_

Cause of Accident : \_\_\_\_\_

Did you report to police : \_\_\_\_\_  
and/or Fire Brigade

When if not Why : \_\_\_\_\_

The above information's are true. So for as we know and believe.

**Signature of client and date**

**Office Seal**

**Contact no:**