SALAMA

الشركة الإسلامية العربية للتأمين (ش.م.ع.)
ISLAMIC ARAB INSURANCE CO.(P.S.C.)

CONTRACTOR 'S ALL RISK

This Claim form is issued without prejudice and admission of any liabilities subject to the terms, conditions, and warranties of the Takaful certificate issued to and held by the Insured.
Each of these Questions must be answered completely

1. Takaful Details

Name of Insured:	
Full address:	
Telephone no:	Email:
Policy No:	
Period of Insurance:	

2. Location Details

Name of the Contact Person:

Email:

Mobile No:

Location :

Address of Contract Site:

3. Loss Details

When did the loss or damage occur?	Date:	Time:	☐ AM ☐ PM
Which items were damaged?	☐ Contract Works ☐ Construction Plant & Equipment ☐ Construction Machinery ☐ Erection Works		

What are the estimated costs of repair?

How did the damage occur and what was its probable cause? (Attach incident report &/or Police Report, sketches, photos or any other relevent documents)

How far had the construction of the damaged items(s) progressed at the time of the occurrence of the damage?

Give name(s) and address(es) of witnesses(es) to the occurrence.

How will the damage items be repaired?

Will any alterations or improvements be made to design, construction or material when repairs are carried out?

4.Third Party Liabilities

Is third party liability involved? If yes, please provide details.   ☐ Yes   ☐ No

CONTRACTOR 'S ALL RISK

If there is injury to third party, please provide us their details	
Name:	Contact:
Name:	Contact:
Name:	Contact:
Are existing buildings or surrounding property damaged? If yes, please provide details. ☐ Yes ☐ No	
Remarks:	

5.Participant's Declaration

I/We hereby declare that the above is a full, true and accurate statement, and I/We further declare that the loss/Damage mentioned above, which belongs to me/us and which is covered under the above mentioned Takaful Certificate or Takaful Certificates, was destroyed or damaged as aforesaid according to the extent and values stated. Also, no other person having any interest therein, whether as Owner, Mortgagee, Trustee or otherwise.

_____   _____   _____

Signature :   Company Stamp :   Date :