

Annexure II
Claim form for Payment of Compensation

1. Date & Time of accident:
2. Place of accident:
3. Details of the accident:
4. Details of the deceased or Injured person(s):
 - Name (s):
 - Age:
 - Sex:
 - Address:
 - Occupation:
5. Details of the dead or injured animal(s)
 - Description:
 - Age:
 - Value:
6. In case of non-fatal accidents, details of temporary/permanent/total/partial disabilities suffered, if any: (Enclose a certificate issued by the relevant Medical Board or any competent Authority)
7. Details of the dependents:
8. Whether or not an FIR is registered by the Police:

Signature of the claimant(s)

Name of the claimant(s)

Relationship with the deceased/injured/animal

Enclosures:

For Humans: -

1. Proof of identity of the claimant
2. A copy of the FIR
3. A copy of the post mortem report, if conducted
4. A copy of the inquest report/panchanama, if conducted
5. A copy of the Death certificate or wound certificate.
6. A copy of any photo of the deceased or injured person (after the accident), if available
7. Evidence of relationship with the deceased
8. Evidence of expenses of hospitalization and treatment.

For Animals: -

1. Proof of identity of the claimant
2. A copy of the FIR, if registered.
3. A copy of the post mortem report, if conducted
4. A copy of the inquest report/ panchanama, if conducted
5. A copy of the Death certificate, if issued
6. A copy of any photo of the deceased animal (after the accident), if available.
7. Evidence of ownership and value of the animal(s).