

Corporate Office: Fulcrum Building, 9th Floor, A & B Wing, Sahar Road, Andheri (East), Mumbai 400 099.

Pradhan Mantri Fasal Bima Yojana (PMFBY) Claim form

Name of Farmer	
Father's Name	
Category (SC/ST/OBC/Others) / Gender(M/F)	
Address	
Contact Number	
Aadhaar Number	
Bank Account number	
Bank Name	Branch Location
IFSC CODE	MICR CODE
Account Type	Crop Loan or Saving Account
Whether you have availed any loan on crop/ or hold KCC	YES/ NO
District , Block , Grampanchayat of insured field	
Total Area of Insured	Hectare
Crop under loss	
Date of Loss	
	Localized Risk hailstorm,
Cause of Loss	landslide,
	Inundation Post Harvesting loss
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	Cyclone,
	Cyclonic rains
	Unseasonal rains
In case of Post-Harvest Losses:	
Date of Harvesting	
Reason for keeping crop at loss location:	For Storage,
	To dry in cut and spread condition in the field after harvesting,
	Other, please specify the reason
I/we hereby declare that to the best of my/our knowledge and belief the information provided by me/us are full and true and agree that if I/we have made any false or fraudulent statement or there be any suppression or concealment of fact, the policy shall be cancelled and claim shall be forfeited I/we have received a list of documents with this claim Form to be submitted by me/us and have understood the entire requirement to be fulfilled for administration of this claim and the Company shall not be held responsible for any delay in settlement of claim due to non-fulfillment or requirements including the documents as mentioned in the claim form. I/we agree to provide additional information and additional documents to the Company, if required	
understood the entire requirement to be fulfi shall not be held responsible for any dela requirements including the documents as n	illed for administration of this claim and the Company y in settlement of claim due to non-fulfillment of nentioned in the claim form. I/we agree to provide

Signature – Farmer