

# Pradhan Mantri Fasal Bima Yojana (PMFBY)

## Claim form

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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	<b>YES/ NO</b>
District , Block , Grampanchayat of insured field	
Total Area of Insured	.....Hectare
Crop under loss	
Date of Loss	
Cause of Loss	Localized Risk hailstorm, landslide, Inundation Post Harvesting loss 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

**Declaration:**

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 of 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

**Place:**

**Date:**

**Signature – Farmer**

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