

askari general insurance company limited
4th Floor, AWT Plaza, The Mall, Rawalpindi.
Telephone No. 9272425-7, Fax No. 9272424

ALL RISKS MOBILE PHONE INSURANCE

Kindly provide following information/details

NAME OF INSURED:- _____

ADDRESS: - _____

1) MAKE: - _____

2) MODEL/TYPE: _____

3) SERIAL NUIIMIBER/CODE:- _____

4) USER NAME: _____

5) MOBILE NUMBER:- _____

6) CURRENT MARKET VALUE RS. _____

I hereby declare that answers given above are in every respect true and correct, and that I have not with-held any information within my knowledge likely to affect the decision of the company as to my eligibility for this Cover.

SIGNATURE.