

Claim Form
(Under Hujjaj Muhafiz Scheme)

Hajj Application No. _____

1. Name of Deceased Hajji: _____
2. Father / Husband Name: _____
3. Gender: _____
4. CNIC No. _____
5. Passport No. _____
6. Address: _____
 _____ District: _____
7. Name of Claimant (Nominee/Legal Heir) _____
8. CNIC Of Claimant: _____
9. Nominee Relationship with Deceased: _____
10. Contact: Phone No. _____ Cell No. _____
11. Detail/Cause of Loss: (Death/Disability/Illness) _____
12. Address of Claimant: _____

13. Date of Departure for Hajj: _____
14. Date of Death in KSA: _____

15. Amount of Claim: _____
16. Name of Bank & branch _____
 _____ City _____ Bank Account No. _____
17. Supporting Documents Attached:
 - i. _____
 - ii _____
 - iii _____
 - iv _____
 - v _____
 - vi _____

Signature of Claimant

Date: _____

To:

Accounts Officer (Refund)

M/O Religious Affairs & Interfaith Harmony, ISLAMABAD.

- *The detail of the requisite documents has been given on the back side on page ii*

(ii)

Documents Required for Death Compensation Cases under Hujjaj Muhafiz Scheme

- i) Claim Form (Filled copy enclosed)
- ii) Copy of CNIC of deceased Hajj pilgrim.
- ii) Copy of CNIC of Nominee.
- iv) Copy of death certificate.
- v) Affidavit signed by all family members duly attested by the witnesses and Notary Public/Oath Commissioner in favour of the Nominee for payment of compensation along with their copies of CNICs.