



TR INSURED

A Test P&C INSURANCE Company

Auto Insurance Claim Document

Customer Information:

- **Name:** Joe Smo
- **Address:** 1 Main Street, New York City, NY 10001
- **Phone Number:** +1 123 456 7890
- **Email:** dummy1@1.com
- **Policy Number:** TRI 012345678

Incident Information:

- **Date of Incident:** 1/1/2023
- **Time of Incident:** 12pm est
- **Location of Incident:** 2 Not Main Street, New York City, NY 1003
- **Description of Incident:** Someone hit the back of the parked car and ran away

Vehicle Information:

- **Vehicle Owner's Name (if different from customer):** NA
- **Make and Model of Vehicle:** 2010 Lexus IS 350C
- **Vehicle Identification Number (VIN):** JTHFE2C24A2504933
- **License Plate Number:** GDT 2058

Witnesses (if any):

- **Name of Witness 1:** Jane Smo
- **Contact Information of Witness 1:** +1 098 7651234
- **Name of Witness 2:**

- **Contact Information of Witness 2:**

Police Report (if filed):

- **Police Report Number:** NYPD 1234
- **Name of Reporting Officer:** Catch Ali
- **Police Department Contact Information:** +1 980 765 1234

Damage and Injuries:

- **Extent of Vehicle Damage:** Dent in the back bumper and the trunk. Back lights broken
- **Injuries Sustained:** Customer has few bruises in arms and legs

Additional Comments:

- I was not in car when accident occurred. When I came to parking lot from store in the same plaza and checked out the car, I noticed the incident and the damages.