

Insurance Claim Report

CLM-2026-00009

Status: SUBMITTED

CUSTOMER INFORMATION

FULL NAME

CLIENT

EMAIL ADDRESS

client@gmail.com

MOBILE NUMBER

233232323

VEHICLE DETAILS

MAKE & MODEL

toyota toyota

YEAR

2026

COLOR

black

REGISTRATION NUMBER

SDGFDGSDFGSDFGSDF

CHASSIS NUMBER (VIN)

—

ENGINE NUMBER

SDFSDFSDFSDF

INSURANCE POLICY DETAILS

POLICY NUMBER

FDSGDFD

INSURANCE COMPANY

Bharti AXA

POLICY TYPE

—

POLICY START DATE

—

POLICY END DATE

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CLAIM DETAILS

CLAIM TYPE

Accident

INCIDENT DATE

10 Feb 2026

ESTIMATED DAMAGE

54

INCIDENT LOCATION

ERTWRTWER

INCIDENT DESCRIPTION

This is my car.

ADMIN NOTES & RECOMMENDATIONS

asdfsasdfsdf

ATTACHED DOCUMENTS (5)

#	FILE NAME	TYPE
1.	Screenshot 2026-02-04 132045.png	DAMAGE_PHOTOS
2.	Screenshot 2026-02-04 132036.png	FIR
3.	Screenshot 2026-02-04 132045.png	PAN_CARD
4.	Screenshot 2026-02-04 132045.png	PAN_CARD
5.	Screenshot 2026-02-04 132036.png	OTHER