

MOTOR INSURANCE CLAIM FORM

CLAIM NUMBER
CLM-2026-00018

SUBMISSION DATE
11 Feb 2026

STATUS
SUBMITTED

SECTION 1: CUSTOMER INFORMATION

FULL NAME:

CLIENT

EMAIL ADDRESS:

client@gmail.com

MOBILE NUMBER:

233232323

SECTION 2: VEHICLE DETAILS

MAKE & MODEL:

toyota toyota

VARIANT:

EDWDAS

YEAR:

2026

VEHICLE TYPE:

Van

COLOR:

black

FUEL TYPE:

Petrol

TRANSMISSION:

Man-u-al

USAGE TYPE:

Per-son-al

REGISTRATION NO.:

SDGFDGS-DFGSD-FGSDF

RC NUMBER:

SSSSSSSS

REGISTRATION DATE:

11 Feb 2026

ODOMETER (KM):

54

CHASSIS NUMBER:

DDFD-FGDFD

ENGINE NUMBER:

12121212

SECTION 3: INSURANCE POLICY DETAILS

POLICY NUMBER:

DDDEEE

INSURANCE COMPANY:

IFFCO Tokio

POLICY TYPE:

Compre-hensive

IDV VALUE:

145

POLICY START:

11 Feb 2026

POLICY END:

11 Feb 2026

EXPIRY DATE:

11 Feb 2026

VEHICLE CONDITION BEFORE:

Excellent

PREVIOUS ACCIDENT HISTORY:

Unknown

SECTION 4: CLAIM & INCIDENT DETAILS

CLAIM TYPE:

Accident

INCIDENT DATE:

11 Feb
2026

ESTIMATED DAMAGE:

54

INCIDENT LOCATION:

ERTWRTWER

INCIDENT DESCRIPTION:

This is my car.

DAMAGE AREAS:

["Front Bumper", "Rear Bumper", "Left Side", "Right Side", "Roof", "Hood/Bonnet", "Trunk/Boot", "Windshield", "Rear Glass", "Left Headlight", "Right Headlight"]

SECTION 5: ADMIN NOTES & RECOMMENDATIONS

ADMIN NOTES:

test test

SECTION 6: ATTACHED DOCUMENTS (14)

10 Feb 2026	10 Feb 2026	10 Feb 2026
IDV VALUE <u>22</u>	VEHICLE CONDITION BEFORE <u>Excellent</u>	
CLAIM DETAILS		
CLAIM TYPE	INCIDENT DATE	ESTIMATED DAMAGE
Own Damage	10 Feb 2026	<u>12</u>
INCIDENT LOCATION <u>mandi</u>		
INCIDENT DESCRIPTION <u>This is my car.</u>		
DAMAGE AREAS ["Rear Bumper", "Front Bumper", "Left Side", "Right Side", "Roof"]		
DAMAGE PHOTOS		

DRUCK	Commercio	ZG
REGISTRATION NUMBER SDGFDGSDFGSDFGSDF	RC NUMBER SSSSSSSS	REGISTRATION DATE 10 Feb 2026
CHASSIS NUMBER (VIN) DDDFDFGDFD	ENGINE NUMBER SDFSDFSDSDF	
INSURANCE POLICY DETAILS		
POLICY NUMBER FDSGDFD	INSURANCE COMPANY Bharti AXA	POLICY TYPE Comprehensive
POLICY START DATE 10 Feb 2026	POLICY END DATE 10 Feb 2026	POLICY EXPIRY DATE 10 Feb 2026
IDV VALUE 32	VEHICLE CONDITION BEFORE Good	
PREVIOUS ACCIDENT HISTORY		

FIR

DRUCK	Commercio	ZG
REGISTRATION NUMBER SDGFDGSDFGSDFGSDF	RC NUMBER SSSSSSSS	REGISTRATION DATE 10 Feb 2026
CHASSIS NUMBER (VIN) DDDFDFGDFD	ENGINE NUMBER SDFSDFSDSDF	
CLAIM DETAILS		
CLAIM TYPE	INCIDENT DATE 10 Feb 2026	ESTIMATED DAMAGE 12
INCIDENT LOCATION mandi	INCIDENT DESCRIPTION This is my car.	
DAMAGE AREAS ["Rear Bumper", "Front Bumper", "Left Side", "Right Side", "Roof"]		
PAN CARD		

PAN CARD

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IDV VALUE 32	VEHICLE CONDITION BEFORE Good	
PREVIOUS ACCIDENT HISTORY		

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AADHAAR		

AADHAAR

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AADHAAR

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DRIVING LICENSE		

DRIVING LICENSE

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DRIVING LICENSE

AADHAAR	AADHAAR
DRIVING LICENSE	
DRIVING LICENSE	
POLICY	

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POLICY		

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IDV VALUE 32	VEHICLE CONDITION BEFORE Good	
BANK PASSBOOK		

REGISTRATION NUMBER SDGFDGSDFGSDFGSDF	RC NUMBER SSSSSSS	REGISTRATION DATE 10 Feb 2026
CHASSIS NUMBER (VIN) DDDFGDFDFD	ENGINE NUMBER SDFSDFSDFSDF	
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RC BOOK		

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IDV VALUE 32	VEHICLE CONDITION BEFORE Good	
OTHER		

CLIENT SIGNATURE

Date: _____

AUTHORIZED SIGNATURE

Date: _____

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For any queries, please contact the insurance company directly.

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