

# 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:	Manual	USAGE TYPE:	Personal
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:	DDDEEEE	INSURANCE COMPANY:	IFFCO Tokio		
POLICY TYPE:	Comprehensive	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","Wind-shield","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

22

VEHICLE CONDITION BEFORE

Excellent

CLAIM DETAILS

CLAIM TYPE

INCIDENT DATE

ESTIMATED DAMAGE

Own Damage

10 Feb 2026

12

INCIDENT LOCATION

mandi

INCIDENT DESCRIPTION

This is my car.

DAMAGE AREAS

["Rear Bumper","Front Bumper","Left Side","Right Side","Roof"]

DAMAGE PHOTOS

BOOK

COMMITTEE

23

REGISTRATION NUMBER

SDGFDGSDFGSDFGSDF

RC NUMBER

SSSSSSSS

REGISTRATION DATE

10 Feb 2026

CHASSIS NUMBER (VIN)

DDDFDGD

ENGINE NUMBER

SDFSDFSDFSDF

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

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BOOK

COMMITTEE

23

REGISTRATION NUMBER

SDGFDGSDFGSDFGSDF

RC NUMBER

SSSSSSSS

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IDV VALUE

32

VEHICLE CONDITION BEFORE

Good

PAN CARD

BOOK

COMMITTEE

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IDV VALUE

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VEHICLE CONDITION BEFORE

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AADHAAR

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DRIVING LICENSE

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DRIVING LICENSE

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DRIVING LICENSE

DRIVING LICENSE

POLICY

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BANK PASSBOOK

BOOK

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RC BOOK

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Good

OTHER

CLIENT SIGNATURE

Date: \_\_\_\_\_

AUTHORIZED SIGNATURE

Date: \_\_\_\_\_

This is a computer-generated document. All information provided is subject to verification.  
For any queries, please contact the insurance company directly.