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CSIO		AUTOMOBILE LOSS NOTICE		INSURER CLAIM NUMBER A22B5	
INSURANCE COMPANY DELOITTE INSURANCE		BROKER REFERENCE NUMBER 2204		CATASTROPHE NUMBER 700	
				POLICY NUMBER 1223	
10. AUTHORITY REPORT INFORMATION					
<input checked="" type="checkbox"/> POLICE		<input checked="" type="checkbox"/> FIRE DEPARTMENT		<input checked="" type="checkbox"/> OTHER	
MUNICIPALITY/CITY TORONTO		MUNICIPALITY/CITY TORONTO		MUNICIPALITY/CITY TORONTO	
DIVISION NUMBER ANN 12		STATION NUMBER 800		LOCATION NUMBER	
OFFICER'S NAME DAVE JOHNSON		CONTACT NAME ERIC JONES		CONTACT NAME LUCY DAVIS	
CONTACT NUMBER 647-251-2009		CONTACT NUMBER 416-818-0101		CONTACT NUMBER	
BADGE NUMBER A88 100		BADGE NUMBER BCD101		BADGE NUMBER	
DATE REPORTED 3/22/2019		DATE REPORTED 3/23/2019		DATE REPORTED 3/20/2019	
OCCURENCE NUMBER 7001		REPORT NUMBER 88		REPORT NUMBER	
CHARGES LAID NONE		OTHER		CHARGES LAID	
11. INJURED PARTY <input type="checkbox"/> NONE REPORTED Specify Type: <input type="checkbox"/> A - Insured driver <input checked="" type="checkbox"/> B - Insured passenger <input type="checkbox"/> C - Third party driver or passenger <input type="checkbox"/> D - Pedestrian					
MARY SMITH					
20 ADELAIDE ST. W.					
TORONTO, ONTARIO					
CONTACT NUMBER HOME 647-221-2020 CELL 647-221-2020 FAX				PREFERRED LANGUAGE <input checked="" type="checkbox"/> ENGLISH <input type="checkbox"/> FRENCH	
NATURE OF INJURY BROKEN HIP				HOSPITALIZED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
12 (A). THIRD PARTY OWNER INFORMATION					
LOUIS STAPLES					
13 KING ST.					
TORONTO, ON					
CONTACT NUMBER HOME 905-444-8382 CELL 905-444-8382 FAX				PREFERRED LANGUAGE <input type="checkbox"/> ENGLISH <input checked="" type="checkbox"/> FRENCH	
12 (B). THIRD PARTY VEHICLE INFORMATION					
YEAR 2002		MAKE SUBARU		MODEL OUTBACK	
INSURANCE COMPANY DESJARDINS		POLICY NUMBER 1200 ANX			
WHERE CAN VEHICLE BE SEEN? 13 KING ST.		WHEN CAN VEHICLE BE SEEN? 4/2/2019 TIME 3:00 <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M.			
12 (C). THIRD PARTY DRIVER INFORMATION <input type="checkbox"/> NAME AND ADDRESS SAME AS SECTION 12A					
NANCY STAPLES					
13 KING ST.					
TORONTO, ONTARIO, CA					
DRIV. LIC. # 6400D48C		DATE OF BIRTH 11/12/1999		POSTAL CODE A1B 3D6	
CONTACT NUMBER HOME 647-221-2020 CELL 647-221-2020 FAX		PREFERRED LANGUAGE <input type="checkbox"/> ENGLISH <input checked="" type="checkbox"/> FRENCH		USED WITH PERMISSION? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
				PURPOSE OF USE TRANSPORT	
12 (D). THIRD PARTY DAMAGE INFORMATION					
AREA OF DAMAGE SIDE, MIRROR				REPAIR ESTIMATE \$ 10 000	
DESCRIPTION OF PROPERTY DAMAGE (OTHER THAN VEHICLE) BROKEN COMPUTER \$12 000				DRIVABLE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
13. WITNESS CONTACT INFORMATION					
STEPHEN GOLDSMITH					
12 QUEEN ST. W.					
TORONTO, ON, CA					
CONTACT NUMBER HOME 647-909-8001 CELL 647-909-8001 FAX				PREFERRED LANGUAGE <input checked="" type="checkbox"/> ENGLISH <input type="checkbox"/> FRENCH	
14. ADJUSTER ASSIGNMENT INFORMATION					
EMILY GOLDSTEIN					
CONTACT NUMBER HOME 647-866-7272 CELL 647-866-7272 FAX				EMAIL ADDRESS emily.goldstein@yahoo.ca	
REPORTED BY JANE DOE				DATE 4/4/2019 TIME 2:00 <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M.	
REPORTED TO COMPANY BY JAMES LU				DATE 4/5/2019 TIME 9:00 <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M.	