# MILMAR
## INSURANCE CONSULTANTS LTD

**mc** Insurance Brokers

## MOTOR CLAIM INTIMATION FORM

**Claim Intimation Details :**

| | |
|---|---|
| **System Claim No. : 40** | **Insurer Claim No. : 40** |
| **External Claim No. :** | **Registered Date :** |
| **Reported Branch :** | **Reported By :** |
| **Intermediary Name :** | **Reported Date :** |
| **Registered By :** | |