

---

## Accident Claim Form

---

Claim ID: CLM-2025-01-0011-ACC

Policy Number: POL-400011

Insurance Start Date: 2024-05-02

Insurance Expiry Date: 2025-03-06

Incident Type: Side swipe

Incident Date: 2025-02-03

Registration: MH 12 AB 4567

Location: Chennai

RC No: RC-PB-358222

DL No: DL-PB-2025-275141

Injuries Reported: True

Estimated Damage Cost: ₹246849

Police Report Filed: True

Police Report No: PR-10011-ACC