
Accident Claim Form

Claim ID: CLM-2025-01-0090-ACC

Policy Number: POL-400090

Insurance Start Date: 2025-01-11

Insurance Expiry Date: 2026-09-05

Incident Type: Side swipe

Incident Date: 2025-05-25

Registration: MH 12 AB 4567

Location: Chennai

RC No: RC-MH-753069

DL No: DL-MH-2025-931397

Injuries Reported: True

Estimated Damage Cost: -242326

Police Report Filed: True

Police Report No: PR-10090-ACC