

Insurance Claim Document

Lokesh
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February 23, 2025

ABC Insurance Co.
456 Oak Avenue
[City, State ZIP Code]

Subject: Mobile Device Insurance Claim - Policy Number: POL123456789

Dear Claims Department,

I am writing to file a claim for my damaged mobile device under my insurance policy number POL123456789. The incident occurred on February 01, 2025 at approximately 12:41 AM.

Device Information:

Make/Model: XYZPhone 12 Pro
IMEI/Serial Number: 6573709000000000
Purchase Date: September 25, 2023

Incident Details:

The device was accidentally went on by lorry.

Claim Details:

I am seeking replacement of my device as per the terms of my policy. I have attached the following required documents to support my claim:

- Completed and signed Mobile Device Insurance Claim Form
- Original sales receipt showing the non-subsidized retail cost, date, and description of purchase
- Copy of my credit card statement showing the device charge or monthly payments
- Repair estimate from an authorized repair center
- Photos of the damaged device

Please process my claim at your earliest convenience. If you require any additional information or documentation, please contact me using the information provided above.

Thank you for your prompt attention to this matter.

Sincerely,

Lokesh

Enclosures: Mobile Device Insurance Claim Form, Sales Receipt, Credit Card Statement,
Repair Estimate, Photos of Damaged Device