

AUTOMOBILE LOSS NOTICE

DATE (DD/MM/YYYY)

31/01/2026

ACORD FORM (First Notice of Loss)

AGENCY / POLICY INFORMATION

POLICY NUMBER
NIAC-TN-2025-12890

POLICYHOLDER NAME (First, Middle, Last)
Anitha Krishnamurthy

DATE OF BIRTH
05/05/1982

EMAIL ADDRESS
anitha.k@outlook.com

CARRIER
New India Assurance Co.

EFFECTIVE DATES
01/01/2025 to 31/12/2025

CONTACT PHONE
+91-9443012345

LOSS / INCIDENT INFORMATION

DATE OF LOSS (DD/MM/YYYY)
29/01/2026

TIME OF LOSS
8:15 AM

LOCATION OF LOSS
Anna Salai, near Saidapet junction, Chennai, Tamil Nadu 600015

DESCRIPTION OF ACCIDENT

Head-on collision with a truck that jumped the median. The insured driver suffered serious bodily injury including fractured ribs and a dislocated shoulder. The passenger sustained a head injury requiring hospitalization and emergency surgery. Both are currently admitted to Apollo Hospital, Chennai.

INSURED VEHICLE / ASSET DETAILS

ASSET TYPE
Motor Vehicle - Private Car

YEAR / MAKE
2021 Toyota

MODEL / BODY TYPE
Innova Crysta GX - MPV

V.I.N. / ASSET ID
MHFZ29G0SM0012345

PLATE NUMBER / REGISTRATION
TN-01-BC-5678

STATE
Tamil Nadu

DESCRIBE DAMAGE

Complete front-end damage, engine bay crushed, windshield shattered, both front doors jammed

OTHER VEHICLE / THIRD PARTY

THIRD PARTY NAME
Ramu Transport - Driver: Selvam

THIRD PARTY VEHICLE
2019 Tata LPT 1613 Truck - TN-22-G-4567

THIRD PARTY CONTACT / INSURANCE
Ramu Transport: +91-4428001234, Bajaj Allianz Policy #BA-COM-2024-99876

INJURED PERSONS

NAME
Anitha Krishnamurthy, Deepa Lakshmi (passenger)

EXTENT OF INJURY
Fractured ribs, dislocated shoulder (driver). Head injury requiring surgery (passenger)

ESTIMATE & CLAIM DETAILS

ESTIMATED DAMAGE (INR)
3,50,000

INITIAL ESTIMATE (INR)
3,50,000

CLAIM TYPE
Injury - Bodily Injury + Property
ACORD FORM (Sample FNOL)

ATTACHMENTS
Hospital admission records, Photos (8), FIR copy, Ambulance receipt
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