

Ref No. : SAL/VAS/2024-25/509 **Date :** 12-07-2024

INTIAL LOSS ASSESSMENT (ILA) REPORT

Name & Contact of the Insured		Vivek S &	
Claim No.			
Policy No , Policy Period		, 12/07/2024 to 12/07/2024	
Date of Accident		12/07/2024	
Vehicle Registration No.		906795	
Chassis No.	Engine No.		
(as per physical verfication)			
Date of appointment	Date & Time of first visit for inspection	10/07/2024	12/07/2024 16:51
Place of inspection (if different from the repairers workshop)		Patparganj Samara Hyundai	
Brief descriptoin of accident			
Whether the nature of damage corroborates with the cause of loss		,	
Whether accompanied by NIC Officer. if yes Name, & Designation of the Office			
Loss Estimate		5000.00	
Major damage physically noticed			
Suspected Internal damage			
Whether Spot Survey report/ if yes, any further damage ob- shifting the vehicle from the s	served subsequently after		
Any pre-existing/old damage			
Perferred Mode of Assessment (Repair/CTL)			
Insurers approx. liability		2500.00	
Other Information relevent for assessement of loss & discrepaincies observed in vehicluar document (if any)			
Surveyor APP Token Number/s			
Name of the NIC officer with whom ILA discussed			

2. In case CTL, submit preliminary report within 7 days with at-least 2/3 online/offline wreck quotation.

Signature