

INITIAL LOSS ASSESSMENT (ILA) REPORT

Name & Contact of the Insured		Mr. Ashok Kumar &	
Claim No.		36070031240390000039	
Policy No , Policy Period		36070031232000001381 , 16/06/2023 to 15/06/2024	
Date of Accident		10/04/2024	
Vehicle Registration No.		PB 05AR 9508	
Chassis No.	Engine No.	63835	41985
(as per physical verification )		Yes	Yes
Date of appointment	Date & Time of first visit for inspection	11/04/2024	11/04/2024 12:12
Place of inspection ( if different from the repairers workshop )		DEEP TATA Motor, FZR.	
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		93699.39	
Major damage physically noticed			
Suspected Internal damage			
Whether Spot Survey report/ photographs received, if yes, any further damage observed subsequently after shifting the vehicle from the spot			
Any pre-existing/old damage			
Perferred Mode of Assessment (Repair/CTL)			
Insurers approx. liability		67078.58	
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			
1. ATTACH A FEW PHOTOGRAPHS CLEARLY SHOWING THE DAMAGES 2. In case CTL, submit preliminary report within 7 days with at-least 2/3 online/offline wreck quotation.			

Signature