



Ref No. :test/2023-2024/13

Date :12-08-2023

INITIAL LOSS ASSESSMENT (ILA) REPORT

Name & Contact of the Insured		Insured Name&Address	
Claim No.		2	
Policy No.	Policy Period	3	from 20-10-2023 to 20-10-2041
Date of Accident		25-08-2023	
Vehicle Registration No.		FGVH3453SDA	
Chassis No.	Engine No.	WEFF582	HUYBFG
(as per physical verification)		453543	fgh5466df
Date of appointment & Date & Time of first visit for inspection		25-08-2023	16-05-2024 12:05
Place of inspection (if different from the repairers workshop)		Lucknow	
Brief descriptoin of accident		accident_Brief_description ,	
Whether the nature of damage corroborates with the cause of loss		damage_corroborates_with_cause_of_loss	
Whether accompanied by NIC Officer. if yes Name, & Designation of the Office		accompanied_insurer_officer_details	
Loss Estimate			
Major damage physically noticed		major_physical_damages	
Suspected Internal damage		suspected_Internal_damages	
Whether Spot Survey report/ photographs received, if yes, any further damage observed subsequently after shifting the vehicle from the spot		spot_Survey_details	
Any pre-existing/old damage		preexisting_old_damages	
Perferred Mode of Assessment (Repair/CTL)		preferred_Mode_of_Assessment	
Insurers approx. liability			
Other Information relevent for assesement of loss & discrepaincies observed in vehicluar document (if any)		Vehicular_document_observation detail	
Surveyor APP Token Number/s			
Name of the NIC officer with whom ILA discussed		ILA_discussed_with	
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