



Ref No. : SAL/VAS/2024-25/503

Date : 10-06-2024

INITIAL LOSS ASSESSMENT (ILA) REPORT

Name & Contact of the Insured		test & test	
Claim No.		gj34	
Policy No , Policy Period		35678 , 10/01/2023 to 09/01/2025	
Date of Accident		08/06/2024	
Vehicle Registration No.		MH 03 FM 2314	
Chassis No.	Engine No.	4567	34567
(as per physical verification)			
Date of appointment	Date & Time of first visit for inspection	11/06/2024	10/06/2024 13:38
Place of inspection (if different from the repairers workshop)		Mumbai First Workshop	
Brief description 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		300.00	
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			
Preferred Mode of Assessment (Repair/CTL)			
Insurers approx. liability		225.00	
Other Information relevant for assessment of loss & discrepancies observed in vehicular 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