



Claim File

Have you reported: No
Who was driving at that time: Me
Insurance Policy #: 1234vndgdg
Incident Date: 2019-10-18
Incident Location: Brampton
Agreement #: 28
Cstmr's version of accident: dummy content to be replaced with actual version of accident

Accident Report: 1225
Type: **Excess Coverage**

Name: Karan
Maximum Amount: 200.00

Cost Type:	Estimated Cost	Details
1st Tow	200	first tow

Source of Customer: website

Body Shop: Tire Terminal

Date In to Body Shop: 2018-11-01

Date In Notes:

Estimated Repair Date: 2018-11-04

Estimated Repair Date Notes:

Fault: Not At Fault

Status: Open

Police Details:

Third Party Name:

Third Party Insurance #:

Third Party Contact #:

Third Party Car Make:

Third Party Car Model:

Third Party Car Plate #:

Third Party Address:

Insurance Company Name:

Insurance Claim #:

Adjustor Name:

Adjustor Contact #:

Adjustor Email ID:

Team Lead Name:

Notes: notes added- created on 03/27/2021 02:26

Pictures after damage:

Pictures before repair:



Comfort
INN

Pictures after repair:



Additional Pictures:

Additional Documents: