

Claim File

Have you reported: No

Who was driving at that time: me

Insurance Policy #: 13442

Incident Date: 2018-11-01

Incident Location: Brampton

Agreement #: 2

Cstmr's version of accident: tst

Accident Report: 123098

Type: Personal Insurance

Company Name: abc

Online CDW: 245xgf

Cost Type: Estimated Cost Details

Repairs 200 repairing

Source of Customer:

Body shop: First Choice

Date In to Body shop: 2019-05-15

Date In Notes:

Date Out of Body Shop: 2019-05-22

Date In 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:	
Insuarnce Claim #:	
Adjustor Name:	

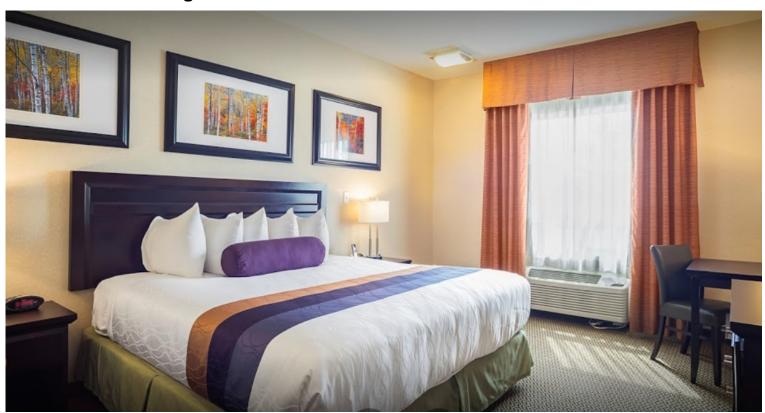
Adjustor C	ontact #:
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Adjustor Email ID:

Team Lead Name:

Notes:

Pictures after damage:



Pictures before repair:



Pictures after repair:

Additional Pictures:

Additional Documents: