

Cashless Vehicle Insurance Claim Form - Sample Format

Download our **cashless vehicle insurance claim form sample format** to simplify the claim process. This template is designed for easy and quick submission, ensuring smooth and hassle-free claim approvals. Use it to provide all necessary details accurately for your insurance provider.

1. Policyholder Information

Policy Number	<input type="text"/>
Name of Policyholder	<input type="text"/>
Contact Number	<input type="text"/>
Email Address	<input type="text"/>
Address	<input type="text"/>

2. Vehicle Details

Vehicle Registration Number	<input type="text"/>
Make / Model	<input type="text"/>
Year of Manufacture	<input type="text"/>
Chassis Number	<input type="text"/>
Engine Number	<input type="text"/>

3. Incident Details

Date & Time of Incident	<input type="text"/>
Place of Incident	<input type="text"/>
Brief Description of Accident/Damage	<input type="text"/>
FIR/Police Report Number (if any)	<input type="text"/>

4. Claim Details

Estimated Cost of Repair	<input type="text"/>
Name of Preferred Cashless Garage	<input type="text"/>
Garage Contact Number	<input type="text"/>

5. Declaration

I hereby declare that the particulars furnished above are true and correct to the best of my knowledge and belief. I agree to provide any additional information as required by the insurance company.

Name & Signature	<input type="text"/>
	<input type="text"/>
Date	<input type="text"/>