Policy Number: WHI01000001181-00

Name of Insured: BAJWA TRANSLINE INC

Name of Agent: AMERIGO INSURANCE AGENCY

Carrier Name: Sutton Specialty Insurance Company



Policy Period: 01/02/2023 TO 01/02/2024

Claim #: WHSU23110006 Date of Loss: 10/19/2023 Accident State: GA Old Claim #: UNK

 Date Open:
 11/02/2023
 Date Closed:
 12/21/2023
 Claim Status:
 Closed
 Insured:
 BAJWA TRANSLINE INC
 Driver:
 SINGH MANDEET

Description of Accident: IV HIT OV WHILE REVERSING INTO OV AT DOCK.

<u>Claimant</u>	<u>Line/Cov</u>	<u>St</u>	Loss Paid	Med Paid	Exp Paid	Current Loss Resv	Current Exp Resv	Current Med Resv	Gross Incurred	Other Recover	<u>Deduct</u> <u>Recover</u>	Salvage Recover	<u>Subro</u> <u>Recover</u>
ERROR	19.4/33	V	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
ATC TRUCKING INC	19.4/33	С	\$2,167.56	\$0.00	\$981.02	\$0.00	\$0.00	\$0.00	\$3,148.58	\$0.00	\$0.00	\$0.00	\$0.00
Group Total for Claim No: WHSU23110006		\$2,167.56	\$0.00	\$981.02	\$0.00	\$0.00	\$0.00	\$3,148.58	\$0.00	\$0.00	\$0.00	\$0.00	

SUB TOTALS for Policy Period: 01/02/2023 TO 01/02/2024

	Loss Paid	Med Paid	Exp Paid	Current	Current	Current	Gross	Other	Deduct	Salvage	Subro
				Loss Resv	Exp Resv	Med Resv	Incurred	Recover	Recover	Recover	Recover
TOTALS IN PERIOD:	\$2,167.56	\$0.00	\$981.02	\$0.00	\$0.00	\$0.00	\$3,148.58	\$0.00	\$0.00	\$0.00	\$0.00

NUMBER OF CLAIMS IN PERIOD: 1

GRAND TOTALS

	Loss Paid	Med Paid	Exp Paid	Current Loss Resv	Current Exp Resv	Current Med Resv	<u>Gross</u> <u>Incurred</u>	Other Recover	<u>Deduct</u> <u>Recover</u>	Salvage Recover	Subro Recover
GRAND TOTALS:	\$2,167.56	\$0.00	\$981.02	\$0.00	\$0.00	\$0.00	\$3,148.58	\$0.00	\$0.00	\$0.00	\$0.00

TOTAL NUMBER OF CLAIMS: 1

Created by: Claims Activity as of 10/06/2024 Run Date: 10/7/2024 10:22:58AM Page 1 of 1