

Insured

Name

Address

Driver's details

Name

Address

Age Licence no.

Description of Insured Vehicle

Year/Make and Model Registration no.

Details of accident

Date Time am pm

Where did the accident occur?

Weather at time of accident Condition of road

Your speed kph Other vehicle's speed kph

What warning was given?

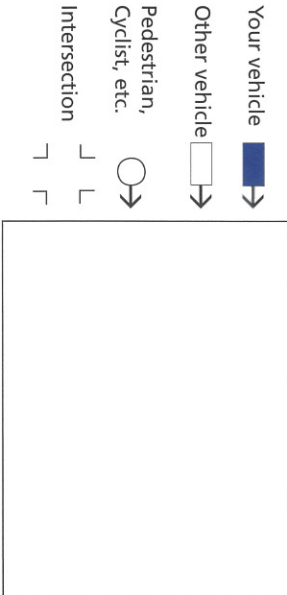
Was the accident reported to the police?

Which police station? Officer's name & No.

Description of accident

Diagram of accident

Show traffic control lights and signs, names of streets, also direction in which vehicles were going, indicate North.



Other vehicle's details

Name of registered owner

Address

Year/Make and Model Registration no.

Insurance Company

Nature of damage

Other driver's details

Name

Address

Private telephone no. Business telephone no.

Age Licence no.

Independent witness(es)

Name

Address

Private telephone no. Business telephone no.

Name

Address

Private telephone no. Business telephone no.

Names and addresses of your passengers

Do not make any admission of liability. You may not be fully aware of the consequences. Make an appropriate statement only to the proper authorities. Do not make a statement to anyone else.