



**WITNESSES**

Give names and addresses of all witnesses

Passengers in Insured's vehicle { \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other Witnesses { \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Employees { Names and Address of conductors, apprentices and employees in vehicle  
\_\_\_\_\_  
\_\_\_\_\_

If no names of witnesses taken, please state reason \_\_\_\_\_

Did Police Official witness accident or take particulars? \_\_\_\_\_  
If not, to which Police or other Authority has accident been reported? \_\_\_\_\_

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**DAMAGE TO INSURED VEHICLE**

State full details of damage parts

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Where can the vehicle be inspected? \_\_\_\_\_

Estimated cost of repair \_\_\_\_\_

Repairer's Name, Address, and Telephone No \_\_\_\_\_

WHERE THE POLICY PROVIDES INSURANCE FOR DAMAGE TO THE VEHICLE, A DETAILED ESTIMATE SHOULD BE SUBMITTED AS SOON AS POSSIBLE, BUT THE REPAIRS SHOULD NOT BE PUT IN HAND WITHOUT THE APPROVAL OF THE COMPANY UNLESS WITHIN THE LIMIT PERMITTED BY THE POLICY

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**THIRD PARTIES INVOLVED IN THE ACCIDENT**

State names and addresses of any passengers and/ or other persons sustaining injury and give nature of injury and stating exactly where they were at the time of the accident

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Give the names and addresses of Owner and registered number of any vehicle concerned \_\_\_\_\_

Give particulars of any damage sustained by such vehicle, or any property not belonging to yourself \_\_\_\_\_

If notice of Third Party claim has been given, verbally or in writing give particulars \_\_\_\_\_

Where can the vehicle be inspected? \_\_\_\_\_

**IF ANY WRITTEN COMMUNICATION IS RECEIVED, PLEASE FORWARD IT IMMEDIATELY UNANSWERED**

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I, .....declare the foregoing particulars to be true in every respect, and I hereby leave in the hands of the Company in accordance with the Conditions of the Policy the conduct of all claims and litigation arising out of this accident and to which the Policy applies, to deal with, to prosecute and /or settle as they think fit without further reference to me; and I undertake to give all such information and assistance as the company may require.

Date.....

Signature.....