

Vehicle Insurance Claim Form

Filing a **vehicle insurance claim** requires a detailed form along with an official police report to ensure accurate documentation of the incident. This sample form guides you through providing essential information needed for a smooth claims process. Including the police report helps verify the accident details, speeding up approval and compensation.

1. Policy Holder Details

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

2. Vehicle Information

Make & Model	<input type="text"/>
Year	<input type="text"/>
Registration Number	<input type="text"/>
VIN (Vehicle Identification Number)	<input type="text"/>

3. Accident Details

Date of Accident	<input type="text"/>
Time of Accident	<input type="text"/>
Location of Accident	<input type="text"/>
Description of Incident	<input type="text"/>
Were there injuries?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Witnesses (if any)	<input type="text"/>

4. Police Report Details

Was the incident reported to police?	<input type="radio"/> Yes <input checked="" type="radio"/> No
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Police Report Number	<input type="text"/>
Police Station Name/Location	<input type="text"/>
Officer Name/Badge Number	<input type="text"/>
Upload Police Report	<input type="button" value="Choose File"/> <input type="text" value="No file selected"/>

5. Declaration

I certify that the information given above is true and complete to the best of my knowledge.

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