

Car Accident Claim Form (Minor Collision)

Filling out a **car accident claim form** for a minor collision helps document the incident accurately and expedites the insurance process. This sample form provides a clear template to report essential details like date, location, and involved parties. Using a well-structured claim form ensures proper communication with insurers and smooth claim resolution.

1. Personal Information

Full Name:

Address:

Contact Number:

Email Address:

2. Accident Details

Date of Accident:

Time of Accident:

Location of Accident:

3. Vehicle and Insurance Information

Vehicle Make/Model/Year:

Vehicle License Plate:

Insurance Policy Number:

4. Other Party Information

Other Driver's Name:

Other Vehicle Make/Model/Year:

Other Vehicle License Plate:

Other Party Insurance Company/Policy Number:

5. Description of the Accident

Please describe what happened (attach photos if available):

6. Police Report

Was a police report filed?

Police Report Number (if applicable):

7. Signature

Signature:

Date:

[Submit Claim](#)