

# Car Accident Claim Form Sample

Use this **car accident claim form sample** to accurately document all property damage details following a vehicle collision. The form ensures that essential information is collected for a smooth and efficient insurance claim process. Properly completed forms help expedite the assessment and settlement of damages.

## 1. Policy Holder Information

**Name:**

**Policy Number:**

**Phone/Email:**

**Address:**

## 2. Accident Details

**Date & Time of Accident:**

**Accident Location:**

**Brief Description of Incident:**

**Was a police report filed?**

Select

**Police Report Number (if applicable):**

## 3. Vehicle & Property Damage Details

**Your Vehicle (Make/Model/Year/Plate):**

**Other Vehicle(s) Involved (if any):**

**Description of Damage to Your Vehicle:**

**Other Property Damaged (e.g., fences, buildings):**

## 4. Witness Information

**Witnesses (Name, Contact Info):**

## 5. Photo & Document Checklist

- Clear photos of vehicle/property damage
- Driver's license & registration (copies)
- Insurance card(s)
- Police report (if any)

## 6. Declaration



**I certify that the information provided is true and complete to the best of my knowledge.**

**Signature:**

**Date:**