

# 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: