

INCIDENT REPORT FORM

OUR REGO#.....

RA#.....

**R
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R**

Full Name Occupation Phone Home

Address Business

..... Mobile

Employers Name & Address

.....

**D
R
I
V
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R**

Full Name Occupation Phone Home

Address Business

..... Mobile

Employers Name & Address

Licence No Expiry Date / / State/Country DOB / /

1. Was the vehicle rented to replace your usual car for one of the following:
accident damage, vehicle breakdown or service? Yes/No

2. If "yes" who is your current Insurer Policy Number Type

3. Had any intoxicating drugs or liquor been consumed within 12 hours of the accident? Yes/No
If "yes" what quantity?

**W
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S**

Full Name Phone

Address

Full Name Phone

Address

Full Name Phone

Address

Was the witness a passenger in insured vehicle Yes/No

Was the witness a passenger in another vehicle Yes/No

**O
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1. Reg No Make Model Insurance Co

Driver Licence No

Address

Owner Address

2. Reg No Make Model Insurance Co

Driver Licence No

Address

Owner Address

Other Property Damage Yes/No If "yes" give details

.....

**I
N
J
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R
Y**

Was any party injured Yes/No If "yes" give details:-

Name Address

Extent of Injury

Name Address

Extent of Injury

Passenger Insured Vehicle Yes/No

Passenger Other Vehicle Yes/No

Date of Incident Time AM/PM

Location (street) City State

Road Surface Sealed Gravel Dirt Sand Other

Weather Dry Wet Fog Other

Visibility Good Bad (give details)

Speed Your Vehicle Other Vehicle(s)

Police Action Reported Yes/No Where File No Officers Name

What Charges Against Whom

Description of incident

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.....

Who, in your opinion, is responsible for causing the incident?

Sketch Plan

Must be Completed

N.B. SKETCH DIAGRAM USING THE SYMBOLS BELOW.



STOP SIGN



RAIL/TRAM TRACKS



VEHICLE DRIVEN BY YOU



ROAD INTERSECTION



PERSONS



PARKED VEHICLE



CURVED ROAD



TRAFFIC LIGHT



OTHER VEHICLE/S, NUMBER 1, 2, 3 ETC. SHOW DIRECTION OF TRAVEL BY ARROW IN SYMBOL



GIVE WAY SIGN



PEDESTRIAN CROSSING



(OTHER ROAD SIGNS - PLEASE SPECIFY)



Detail damage to our vehicle

Detail damage to other vehicle

I/We do hereby solemnly and sincerely warrant and declare that the information herewith provided by me/us is a true and correct record of the incident as recalled by me/us. I/We further declare that all of the questions have been answered by me/us fully and truthfully and I/we declare that I/we have not withheld any relevant information in respect of the incident heretofore described.

Renter's Signature Date

Driver's Signature Date