

Third party details

Name: Car registration:
Address: Make, model and colour:

Their insurer:
Policy number:

Brief description of third party, including approximate age:

Please include details of any other parties or vehicles involved on blank page overleaf.

FOLD HERE

Details of any witnesses

Include the names and contact details of any witnesses, including passengers in any of the vehicles, in this section.

Attending police officer

Name and ID/collar number:
Incident number:
Contact police station:

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Road accident information form



Your guide to what information we'll need to help you with your personal injury claim. **Print out, fold, and keep in your glove box** in case of an accident that wasn't your fault. Call us on 0300 333 0303 and select option 1 for personal injury claims.

FOLD HERE

Your details

Car registration:
Your insurer:
Policy number:
Claim department telephone number:

Accident details

Date:
Time:
Location (please be as specific as possible):

Use blank page overleaf for details of weather conditions and circumstances of the accident.

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