



**PLEASE PRINT OUT THIS PAGE AND KEEP IT IN YOUR VEHICLE.**

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**COMPLIMENTS OF A&R AUTOBODY**

**General Information**

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Weather & Road Conditions: \_\_\_\_\_

Accident Location: \_\_\_\_\_

Anyone Injured: \_\_\_\_\_

Damaged area of other vehicle: \_\_\_\_\_

Witness name and Phone: \_\_\_\_\_

Police officer name: \_\_\_\_\_

Badge #: \_\_\_\_\_

Case #: \_\_\_\_\_

Other: \_\_\_\_\_

**Other Persons Information**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: Home \_\_\_\_\_ Work \_\_\_\_\_

License #: \_\_\_\_\_

Plate #: \_\_\_\_\_

Color of Car: \_\_\_\_\_

Year, Make and Model: \_\_\_\_\_

Insurance Co.: \_\_\_\_\_

Policy #: \_\_\_\_\_

Other: \_\_\_\_\_

**Accident Details**

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*This form is for notes only.*

*Do's and Dont's are suggestions only. Please contact your Collision Shop for specifics.*