Person

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Person-ID | Address | Name | Phone | Car |
| … | … | … | … | … |

Car

|  |  |  |
| --- | --- | --- |
| V.I.N. | Model | Year |
| … | … | … |

Accident

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Record-Number | Location | Date | Damage-Amount | Person |
| … | … | … | … | … |