

The document is a claim form for an automobile insurance policy, requiring detailed information to process a claim accurately. It begins by requesting the policyholder's and driver's personal details, including names, addresses, social security numbers, and contact information. The form also asks for specifics about the automobile involved, such as make, model, year, and license plate information. It requires the date, time, and location of the accident, along with details about the accident itself, including the direction of travel, speed, and any traffic violations. The policyholder must provide a narrative of how the accident occurred and whether it was investigated by police.

Additionally, the form collects information about any personal injuries sustained, including the injured person's details, treating doctor, and whether seat belts were in use. It also requests information about any other vehicles or property involved, including the owner's details, insurance information, and damage descriptions. The policyholder must indicate if a claim is being made against them or if they are making a claim against another party.

The section on damage to the policyholder's automobile asks for the cause of damage, estimated repair costs, and details regarding theft if applicable. Witness information is also requested to support the claim. Finally, the form includes a certification section where the policyholder and driver must sign and date the report, affirming the accuracy of the information provided.