

Fax Claims To Henderson Brothers at
(412) 325-0611
Attn: Jennifer Downs



HENDERSON
BROTHERS

AUTOMOBILE CLAIM REPORT

Dates of Loss: _____ Date Reported: _____

Insured Name: _____

Address _____

City: _____ State: _____ Phone: (____) _____

LOCATION OF LOSS: _____

DESCRIPTION OF ACCIDENT: _____

INSURED VEHICLE

Year _____ Make _____ Model _____

V.I.N. _____ Plate _____

Extent of Damages _____

Present Location _____

Driver _____

Date of Birth: _____ License No. _____ State _____

OTHER VEHICLE

Year _____ Make _____ Model _____

Extent of Damages _____

Owner _____ Phone _____

Address _____

City _____ State _____ Zip _____

Driver Information: _____

INSURANCE INFORMATION

Company Name _____ Policy No. _____

Agent Name _____ Phone _____

**Fax Claims To Henderson Brothers at
(412) 325-0611
Attn: Jennifer Downs**



INJURED

Name _____ Phone _____

Address _____

City _____ State _____ Zip _____

Extent of Injury _____

WITNESSES

Name _____ Phone _____

Address _____

City _____ State _____ Zip _____

IMPACT

Is damaged auto essential to business? _____

How? _____

Reported by: _____

INSTRUCTIONS TO INSURED:

If still on the scene:

1. Contact police
2. Obtain information about other people involved in the accident or anyone who may have witnessed the accident.
 - Name
 - Address
 - Phone number
 - Insurance Carrier
 - Policy Number
 - Etc.
3. Take photos of the accident, if camera available.
4. Have vehicle towed if unable to drive.

If not on the scene:

1. Obtain two estimates for repair if vehicle can be driven.
2. The claim adjuster will either ok one of these two estimates or send an appraiser to see the vehicle.
3. The claim adjuster will deal directly with the other people involved in the accident; you should not deal with them yourself.
4. The insurance company will contact you within 48 hours.