

Vehicle Accident Details Card

Vero Claims 0800 800 134

Vero Windscreen Claims 0800 848 376

This card will assist you "at the scene of an accident" to obtain the necessary details required to complete our official claim form.

IMPORTANT

1. **KEEP this card in your GLOVEBOX.**
2. **DO NOT ADMIT FAULT**
3. **DO NOT make any statement to anyone except proper authorities or an authorised representative of Vero.**
4. **This is NOT a claim form.**
An official claim form is **REQUIRED.**

Name of insured

Name of driver

ACCIDENT DETAILS

Date

Time

Place of accident

Condition of road

OTHER VEHICLE DETAILS

Name of other driver

Address

Phone number

Make of vehicle

Registration No.

Owned by

Insured by

Reported to police

Name of officer

Location

WITNESSES

Names, addresses and phone numbers
of occupants of your vehicle

Names, addresses and phone numbers of any
independent witnesses

DAMAGE TO PROPERTY

Owner

Address

Damage: Car Premises Fixture Other

DAMAGE TO PROPERTY

Drivers notes on accident

DO NOT ADMIT FAULT

Indicate below the exact position of the vehicles
involved. Show skid marks and measurements
if possible, indicate your vehicle as number 1
(other vehicles as 2, 3, 4, etc.)



Talk to your broker,
or find out more at vero.co.nz

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