



JURISTENWERK

RECHTSANWÄLTE

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Questionnaire for traffic accidents

Vehicle keeper / owner:

Is the vehicle leased / financed / assigned as security? yes no

If yes, where? (Information regarding finance bank):

Checkbook (Scheckheft): yes no

Checkbook seamless: yes no

Fully comprehensive insurance (Vollkasko) yes no

If yes, which? (Information regarding fully comprehensive insurance):

Client

(Vehicle keeper / owner):

First and Last Name:

Address:

Telephone:

Email:

Official license plate:

Bank details from the vehicle keeper / owner:

Banking institution/name of the bank:

IBAN:

(BIC):

Is the holder / owner entitled to input tax deduction? yes no

Is there any previous damage to the vehicle? yes no

Legal protection insurance (Rechtsschutzversicherung): yes no

Name:

Postcode, location:

Insurance Certificate No.:

Vehicle driver (only if different from the owner)

First and Last Name:

Address:

Telephone:

Data from the other party involved in the accident

Vehicle keeper (name and address):

Driver (name and address):

Vehicle type:

Made:

official license plate:

Insurance:

Insurance Certificate No.:

Accident information:

Accident place/location:

Accident date:

Accident time:

Accident pictures available:

yes

no

Other parties involved in the accident (name, address, telephone-number):

Accident witnesses (name, address, telephone-number):

Accident recording by:

Name of the police station:

Street:

Postcode, location:

Diary number / File number:

Accident description/ Accident sketch

(Enter direction, lane, street information, house number, license plate, possibly on a separate sheet):