




## Blank Traffic Accident Report

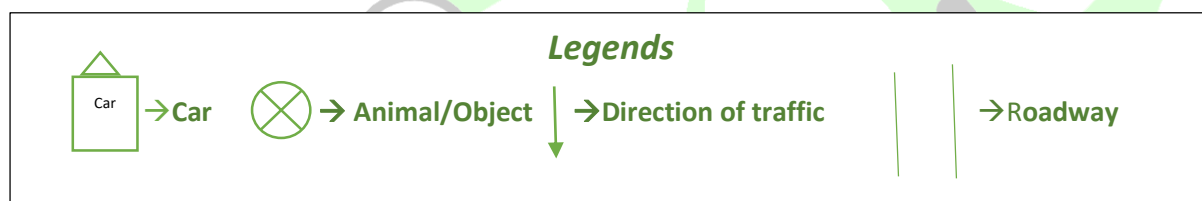
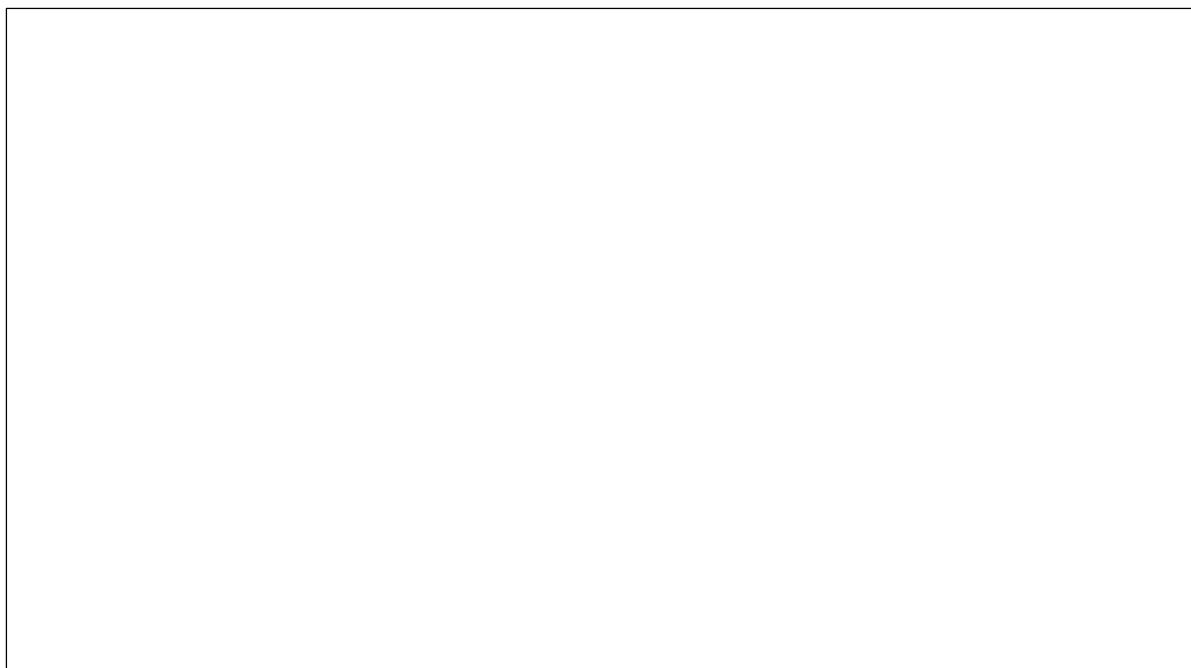
*Please fill in your General Vehicle Information*

Make:	Body Type:	Fuel:
Model:	Cylinders:	Transaxle:
Reg. year:	Seating Cap.:	Steering Pos.:
Model #:	Odometer:	Transmission:
Engine Number:	Rating CC:	Colour:
Reg. No.:	Import Type:	Body Grade:

*Please Write a Brief Report of the Accident*



*Please draw a diagram of the accident using the listed legends*



*Please Record Damages Received*

<b>Bonnet:</b>	<b>Left Headlight:</b>
<b>Right Fender:</b>	<b>Radiator:</b>
<b>Left Fender:</b>	<b>Engine Bay:</b>
<b>Front and back Bumper:</b>	<b>Fog lights:</b>
<b>Crash Bar:</b>	<b>Air bags:</b>
<b>Grill:</b>	<b>Left and Right Rear door:</b>
<b>Right Headlight:</b>	<b>Left and Right Front Door:</b>

