



no birds
bayswater car rental pty ltd

DAMAGE REPORT

Date of Accident:	Time:	Corolla / Rav4 / Tarago	Our Reg No:
Street:	Suburb:	Cross Street:	Road Surface: Bitumen / Gravel

Driver - Our Vehicle			
Name: Mr/Mrs/Ms:		Ph:	
Address:		Email:	

Other Vehicle:			
Make:	Model:	Colour:	Reg No:
Description of Other Vehicles Damage:			

Driver - Other Vehicle			
Mr/Mrs/Ms:		Ph:	Email:
Address:		Driver Lic:	

Owner			
Mr/Mrs/Ms:		Ph:	Email:
Insurer:		Claim/Policy No:	

Additional Vehicle Details			
Make:	Model:	Colour:	Reg No:
Description of Additional Vehicles Damage:			

Driver (for more vehicles, use a separate form)			
Mr/Mrs/Ms		Ph:	Email:
Address:		Driver Lic:	
Insurer:		Claim/Policy No:	

Police Report	Circle Answer
Did Police Attend	YES NO
Was this reported to Police	YES NO
Event Number:	Date reported:

Detailed Accident Description

Your Car Direction:

Speed:

Other Car Direction:

Speed:

How Incident Occurred:

Multiple horizontal lines for text entry.

Who do you consider at fault:

Why:

Witness - Independent/Passenger

Mr/Mrs/Ms

Email:

Address:

Ph:



I believe that the above particulars are true in every respect;

Signature of Driver:

Date:

Office Use Only

Photo Ref:

LA: