

Please fill in completely to insure fastest assignment and turn around.

LOW SPEED COLLISION AND INJURY ANALYSIS

REQUEST FOR TECHNICAL ANALYSIS

This analysis will be based on those documents furnished at the time of this request. It will not include vehicle or site inspections unless requested. All relevant available information should be furnished at this time. Examples of such documents would be: adjuster's report, medical and technical reports, photographs and statements.

Insured: _____ Claimant: _____
 Claim No.: _____ Date & Time of Loss: _____
 Adjuster: Mr./Ms. _____ Phone No.: _____ Fax: _____
 E-mail Address: _____
 Firm Name: _____
 Address: _____
 Please address report attention to: Mr./Ms.: _____
 Shipping Address: _____

ASSIGNMENT:

Please review the submitted documents and determine:

- Could this collision have happened as stated?
- What were the approximate speeds and forces involved in this collision?
- Is such a collision likely to produce the alleged injuries?
- Is the property damage consistent with the circumstances of the alleged collision?
- Other: _____

Documents Submitted:

- Photographs of insured's vehicle
- Photographs of the other damaged vehicles
- Copy of the police report
- Damage/repair estimate for insured vehicle
- Damage/repair estimate for claimant vehicle
- Insured's statement
- Claimant's statement
- Medical records
- Other: _____

Documents Verified (for VGEL use only)

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