

ACCIDENT INVESTIGATION PICTURES

Company: _____ Accident Number: _____

Driver: _____ Accident Date: _____

Telephone: _____ Fax: _____

Accident Location: _____ Vehicle No.(s): _____

- Pictures Taken By: Driver
 Company Investigator: _____
 Insurance Company: _____
 Other: _____

PICTURES AND DESCRIPTIONS

- | | |
|-----------|-----------|
| 1) _____ | 2) _____ |
| 3) _____ | 4) _____ |
| 5) _____ | 6) _____ |
| 7) _____ | 8) _____ |
| 9) _____ | 10) _____ |
| 11) _____ | 12) _____ |