

# Auto Accident Insurance Report

**Insured's Name:** John Doe

**Policy Number:** 123456789

**Date of Accident:** October 10, 2023

**Time of Accident:** 2:30 PM

**Location of Accident:** Main St. & 2nd Ave, Springfield

## Description of Accident:

I was driving my vehicle, a 2020 Honda Accord, when another vehicle, a red Toyota Camry, collided with me from the rear. The impact caused damage to the rear bumper and trunk of my car. I have attached photos of the damages.

## Involved Parties:

**Other Driver's Name:** Jane Smith

**Other Driver's Insurance:** XYZ Insurance, Policy Number: 987654321

## Witness Information:

**Witness Name:** Mark Johnson

**Contact Information:** (555) 123-4567

## Police Report:

The police were called to the scene, and a report was filed. Report number: 1122334455. A copy of the report is attached.

## Claim Request:

Requesting compensation for damages to my vehicle and any related medical expenses. Please find attached all necessary documentation including photos, the police report, and medical records.

**Sincerely,**

John Doe  
123 Elm St,  
Springfield, IL 62701  
(555) 987-6543