

Witness to Accident*

Name of witness

Address

State		Postcode	
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Contact numbers

Work ()

Home ()

Mobile

Was the witness an occupant of your vehicle?

Yes No

Draw a simple diagram

- Mark your vehicle as A
- Mark other vehicles involved as B, C or 1,2,3 etc.
- Name the streets and any landmarks

*This basic diagram may help.
Or draw a diagram on a separate sheet of paper.*

How the claims service can help you

It is our aim to provide you with claims service that is second to none. In doing so, we endeavour to make the claims experience a positive one and strive to meet and, where possible, exceed your expectations.

To assist us in our endeavour, when a vehicle is involved in an incident that is likely to result in a claim please follow the steps under the Section titled *"In the event of an accident"*.

However, if rather than following these steps and taking the vehicle to a nearby repairer you want to deal with us direct, please feel free to do so.

The procedure for arranging the repairs of your vehicle will depend upon how much damage it has sustained and whether it is able to be driven.

Contact details

Sydney	85 Harrington Street	(02) 8275 9999
Brisbane	100 Edward Street	(07) 3859 5666
Melbourne	628 Bourke Street	(03) 9246 2666
Adelaide	45 Pirie Street	(08) 8202 2300
Perth	200 St Georges Terrace	(08) 9213 6100
Hobart	85 Macquarie Street	(03) 6237 3833

**Or call our 24 hour claims advice line 1800 023 387
Website: www.qbe.com**

Glove Box Guide
Claim Kit



What to do in case of an accident



***Note:** This is not a claim form but will assist you in recording relevant details about the accident.

In the event of an accident

1. Notify the police immediately if the other driver(s):

- Refuses to stop;
- Refuses to exchange details;
- Appears to be under the influence of alcohol or drugs.

Also notify the police if:

- Someone is fatally injured or requires medical attention;
- Any vehicle involved needs to be towed away;
- Required by Law.

2. Write down vital details immediately on the Accident Details Form.

See the Accident Details Form for a list of the information you need to collect.

3. Don't admit fault – just state the facts.

Protect your legal rights - don't say the accident is your fault. Of course you should state the true facts of the accident in any statements, but the law does not require you to admit fault. (Admission of liability may result in your claim being denied).

Remember there is no need to insist others are at fault.

Need to make a claim?

Follow these simple steps:

If the vehicle is driveable

- Get an itemised repair quote from a licensed repairer of your choice.
- Complete a QBE claim form.
- Leave your vehicle and the claim form with the repairer, who will arrange an assessment on your behalf or contact your nearest QBE claims office to arrange an assessment.

If the vehicle is not driveable

- Have your vehicle towed to the nearest licensed repairer of your choice. They will prepare a quote and arrange for our assessor to inspect your vehicle.

Don't forget to complete your claim form and leave it with your repairer.

Windscreen or Autoglass damage

QBE recommends O'Brien for all Windscreen and Automotive Glass replacement, no matter what type of vehicle you drive.

Call O'Brien on 13 16 16 and they'll handle the claim for you and have you back on the road fast.

You are free however to select the supplier of your choice.

Hire Car

QBE has negotiated discounted hire car rates with Thrifty Car Rental.

If you need a hire car while your vehicle is off the road, call us for details.

Accident Details of Driver and Vehicle*	
Other drivers' registration plate number and vehicle model	
<input type="text"/>	
Name of other driver	
<input type="text"/>	
Address	
<input type="text"/>	
<input type="text"/>	
State	Postcode
<input type="text"/>	<input type="text"/>
Licence No.	State of Issue
<input type="text"/>	<input type="text"/>
Contact numbers	
Work	()
Home	()
Mobile	<input type="text"/>
Insurance company	
<input type="text"/>	
Where did the accident happen?	
Suburb	<input type="text"/>
Street	<input type="text"/>
Cross Street	<input type="text"/>
Date	Time
<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>
Details of damage to other driver's vehicle	
<input type="text"/>	
<input type="text"/>	
<input type="text"/>	
Name of Police Officer	
<input type="text"/>	
Station	Event No
<input type="text"/>	<input type="text"/>