Damage Report

for car liability insurance
for fully comprehensive insurance



Please send to the following address:

Schadenanzeige@carprofessional.de. Please specify always in the e-mail subject line "Damage Report" and your registration No. Before placing repair order, please get CPM's approval first: service hotline 0800 / 802 63 48, fax 040 / 471 04-42 19 Expert orders may only be commissioned by CPM.

Claim/inguranas Na						
Claim/insurance No.: (filled in by insurance dept.)						
Company:						
Driver's name/Address:				Phone No.:		
Driving license category:	Issuing authority:		Serial No.:	Issue	sued on:	
	_					
Company car:	Registration No. Manufacturer		Туре	Chassis No.	Construction year/mileage	
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	Private trip Business trip according to company car regulation If no specification is made, the trip is handled as a private trip.					
Other party:	Registration No.	Manufacturer	Туре	Type Name of liability insurer and insurance intermediary		
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			•			
Name/Address/Vehicle ow	ner:				Phone No.:	
Name/Address/Driver:				Phone No.:		
Date of accident:	Place of accident (country, city, street, milestone):					
Time of accident:						
Accident description					Accident sketch:	
Where can the vehicles be Company car:	inspected?					
Third party vehicle:						
In case of theft:	Vehicle locked? yes ☐ no ☐	Key removed? yes ☐ no ☐		mmobilizer? es	Steering wheel blocked?	
Road conditions, visibility,	street signs, speeds:					
Name/Address of accide	nt witness:					
Was the accident reporte	yes 🗌 no 🗌	Was a breathalyzer test conducted? yes no				
Which police station recorded the accident:			(exact address, phone No.)?			
			Log No.:			
Who received a caution?			Amount:			
Was a rental car ordered:	yes no	From which rent	al company?			
Damages on company car:					Estimated costs in €:	
Damages on third party vehicle:					Estimated costs in €:	
Other property damages/b	odily injury:			Owner:		
Who, in your opinion, caus						
Incorrect or incomplete of incomplete statements d			he insurance co	over, even if the untru	ie or	

SAVE

SEND