

## Liability Incident/Claim Information Form

This form is provided for you to record any out of the ordinary event or incident involving potential injury to a customer or damage to the property of customers. Be sure to carefully follow steps 1-7 below. Doing so now and thoroughly, could save you time and money!

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1. **Information**—Get all the information possible at the moment you learn of the incident. Make sure to get the information in a manner which will not provoke the injured person. The best way is to express sincere concern for the injured customer.
  2. **Witnesses**—If there are witnesses, get their names and addresses and write down, right now, what they are saying about the incident.
  3. **Photographs**—Take photographs of the area or equipment involved right away.
  4. **Injured Party**—Ask the injured party, in the presence of a witness if possible, to point out exactly what they think caused the accident.
  5. **Be Perceptive**—Very carefully try to determine the true attitude of the hurt party. Many times customers don't express their dismay or feel angry until later after they have gone home.
  6. **Document**—Document everything that happens and take notes. Important facts are quickly forgotten and confused. You can't prove that you weren't at fault if no one can remember what happened. All additional information should be written out and attached.  
Please include:
    - Diagrams of the scene of the incident
    - Keep any physical evidence which will help
    - Repair bills, etc. which will back your story
  7. **Be Alert**—Be alert to false claims. If there appears to be anything "fishy" about the event, it is even more important to get all of the information.
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Date of Event \_\_\_\_\_ Time \_\_\_\_\_ am/pm

What Happened? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Injured Party Name: \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Describe the nature of injury or damage: \_\_\_\_\_

\_\_\_\_\_

What was the cause of the problem? \_\_\_\_\_

\_\_\_\_\_

Your Name: \_\_\_\_\_ Date \_\_\_\_\_

(Sign & Print)

Please remember to attach other notes or documents to this form that will be beneficial to this report and keep in a safe/secure place for your insurance company should you be involved in a lawsuit later.

**\*\*Note:** Frivolous lawsuits often do not surface for two to three years, after the alleged incident, but before the statute of limitations ends.