CLAIMS REPORTING KIT

Administered by

451 Diamond Drive
Ephrata, Washington 98823
(509) 754-2027; Fax (509) 754-3406
Toll Free (800) 407-2027

Report all accidents and losses as soon as possible to your insurance agent and/or Clear Risk Solutions. In reporting accidents or losses, please follow the enclosed guidelines.

Your membership in the insurance co-op requires <u>ALL</u> claims must be reported regardless of size.

CITIES INSURANCE ASSOCIATION OF WASHINGTON
AUTOMOBILE LOSS NOTICE

CLEAR RISK SOLUTIONS
451 Diamond Drive
Ephrata, WA 98823
(800) 407-2027/ Fax (509) 754-3406

DATE:_____

DATE & TIME OF LOSS:
_____AM/PM

INSURED:_____
Insured's Business Phone:_____
Person to Contact:_____

LOSS:
Location of Accident:_____
Description of Accident:_____
_____

INSURED VEHICLE:

Veh. #	Year, Make, Model	V.I. #
_____	_____	_____
_____	_____	_____

Owner's Name, Address & Phone:
_____
Driver's Name & Address:_____
_____
Business Phone:_____ Residence Phone:_____ DOB:_____
Driver's License No.:_____ Estimate Amount:_____
Describe Damage:_____
_____

PROPERTY DAMAGED:
Describe Property:_____
Owner's Name & Address:
_____
_____

OTHER INSURANCE:_____
Business Phone:_____
Residence Phone:_____

Other Driver's Name & Address:
_____
_____

Business Phone:_____
Residence Phone:_____

Describe Damage:_____
Estimate Amount:_____

INJURED:

Name & Address	Phone No.	Extent of Injury
_____	_____	_____
_____	_____	_____
_____	_____	_____

WITNESSES OR PASSENGERS:

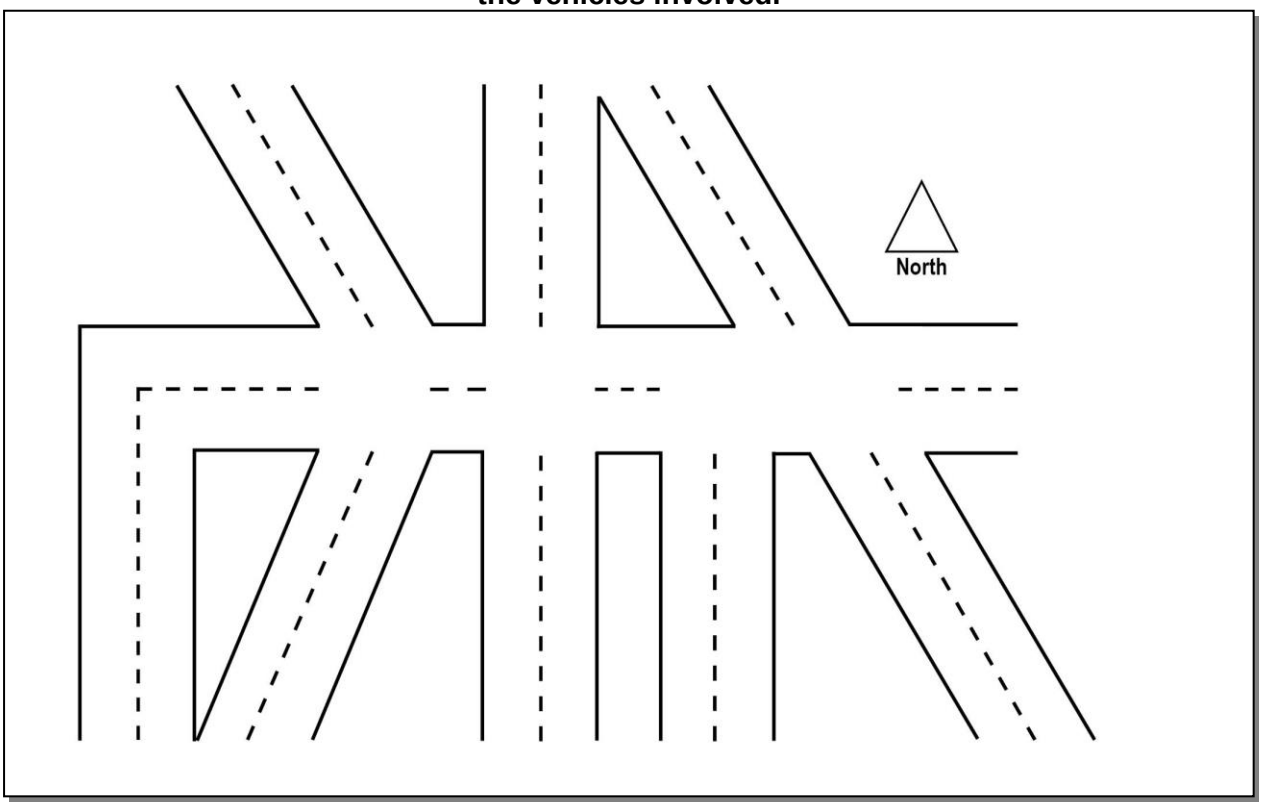
_____	_____	_____
_____	_____	_____
_____	_____	_____

REMARKS:_____
_____

Return to: City of Woodland *Include written estimates, statements, etc.
Attn: Clerk-Treasurer rippm@ci.woodland.wa.us 360-225-8281
PO Box 9 (if mailed); 230 Davidson Avenue (if delivered in person)
Woodland, WA 98674

VEHICLE COLLISION DESCRIPTION DIAGRAM

Show name of highways, points of compass (N/S/E/W) and direction of travel of the vehicles involved.



ROAD CHARACTER	ROAD SURFACE	ROAD DEFECTS	TRAFFIC CONTROL
☐ Straight Road	☐ Dry	☐ Defective Shoulder	☐ Stop Sign
☐ Curve	☐ Wet	☐ Holes, Ruts, Bumps	☐ Stop & Go Signal
☐ Level	☐ Muddy	☐ Loose Material	☐ Flagman/Officer
☐ On Grade	☐ Snowy	☐ Other (Describe)	☐ Other (Describe)
☐ Crest of hill	☐ Icy	☐ No defects	☐ No Traffic Control

LIGHTING	WEATHER	NOTES
☐ Daylight	☐ Clear	☐Yes ☐No Photos Taken
☐ Dusk	☐ Raining	
☐ Dawn	☐ Snowing	
☐ Dark – with streetlight	☐ Fog	
☐ Dark – no streetlight	☐ Other (Describe)	

DRIVER'S STATEMENT

Signature

Date