

**ELLIS-FERMOR & NEGUS**

**SOLICITORS**

**CLIENT QUESTIONNAIRE FOR ROAD TRAFFIC ACCIDENTS**

**CONFIDENTIAL**

**REF:**

**SECTION A**

Personal Details

1. Name:

2. Address:

Telephone :

Home:

Work:

Mobile No:

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3. Address for correspondence:  
(if different)

4. Date of Birth:

5. Marital Status: MR/MRS/MISS

6. Number and ages of children:

7. National Insurance No:

8. Do you have any Legal Expenses Insurance? Yes/No

(Please check all relevant motor insurance policies and household insurance policies and send us a copy of the motor insurance renewal covering the period of your accident)

SECTION B

Accident Details

1. Date of Accident:

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2. Time of accident:

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3. Location of accident:

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4. Description of how the accident occurred:

Please provide a sketch plan of the location and include all relevant road markings, signs, positions of vehicles and estimates of distances)

Please use opposite page if necessary

SECTION B cont.....

5. Who or what do you consider was to blame for your accident?

Please explain why:

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6. Was the accident reported to the Police? YES/NO

If the answer is yes, please give name and address of Police Station the matter was reported to.

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7. Did the Police attend the scene of the accident? YES/NO

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8. Did the Police take any statements? YES/NO

If so, from whom?

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9. Please give details of all witnesses:

	1.	2.	3.
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Name

Address

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10. Registration number, type and colour of your vehicle:

11. Name, address and claims reference of your insurance company:

Comprehensive/Third Party (please delete as appropriate)

12. Name and address of the other driver(s) involved in the accident:

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13. Name and address and claims reference of the other party's insurance company:

Name:  
Address:

Claim Ref:

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14. Registration number, type and colour of the other vehicle(s):

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15. Did you take any photographs?  
(If so please provide a copy)

YES/NO

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16. Do you know whether or not the other party is to be prosecuted by the Police?

YES/NO

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17. Were you wearing a seat belt?  
If not please state the reason:

YES/NO

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18. Please give details of any previous convictions, endorsements?

SECTION C

Vehicle Damage

1. (a) Damage to your vehicle:

(b) Value of vehicle at time of accident: £

2. Is vehicle a write off/repairable?

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3. Details of damage to other vehicle(s):

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4. Where is your vehicle at present?

SECTION D

Medical

1. Name and address of hospital attended:

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2. Name and address of GP:

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3. Injuries sustained:

4. Current injuries complained of:

5. Any previous similar injury?

SECTION E

Employment Details

1. Name and address of employers  
at time of accident:

Date started:

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2. Name and address of employers  
now (if different):

Date started:

3. Name and address of person to  
provide earnings details:

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	Gross	Net	
4. Gross and net earnings:	£	£	per week/month

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5. Regular hours of work: per week/month

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6. Job Title:

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7. Department in which you work:



SECTION F

Loss of Earnings/Expenses

1. Period of absence from work:

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2. If absence from work is continuing,  
when is anticipated date of return  
to work?

3. Have you returned to your normal job? YES/NO  
If NOT, what job are you doing?

4. Have you continued to lose pay since you  
returned to work? YES/NO

If YES please give details  
of lost basic, overtime, bonus etc:

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5. What payments did you receive whilst  
absent from work? £

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6. Have you applied for and are you  
receiving state benefits? YES/NO

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7. Address of local DSS office:

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8. Hire charges £  
Please give details:

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9. Storage charges £  
Please give details:

10. Towing charges                    £  
Please give details:

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11. Travel expenses                    £  
Please give details:

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12. Clothing expenses:                    £  
Please give details :

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13. Medical expenses:                    £  
Please give details :

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14. Any other expenses or losses?    £  
Please give details :

I HEREBY AUTHORISE MY SOLICITORS TO TAKE ANY NECESSARY ACTION TO BRING MY CLAIM FOR COMPENSATION.

SIGNED .....

DATED .....

Please return this form to:

Ellis-Fermor & Negus Solicitors  
5 Market Place  
Ripley  
Derbyshire  
DE5 3BS  
TEL: 01773 744744

Ellis-Fermor & Negus Solicitors  
2 Devonshire Avenue  
Beeston  
Nottingham  
NG9 1BS  
0115 922 1591

Please inform us how you came to choose this firm:

- a) previously used this firm
- b) because of an advertisement
- c) other – please specify