**Prompt Sheet**

**Customer Details**

Name:

DOB:

Address:

Contact Number:

Email:

**Details of the accident**

Where did it occur:

Time:

What happened:

**Were Injuries sustained?**

Details:

**Was First aid administered?**

Details:

**Any witnesses?**

Name:

Contact Details:

Statement:

***Please now complete the form in the electronic version at midcounties.c365online.co.uk and ensure you shred this piece of paper once completed. Do not keep this as a hard copy***