



# MERCANTILE

Debt Recoveries Australia Pty Ltd  
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W [www.debtrecoveries.com.au](http://www.debtrecoveries.com.au)

Dear Sir/Madam,

It is important that we obtain further details about how the incident occurred and your assistance would be appreciated and greatly valued. In order for us to more fully understand the circumstances of the incident, please complete and return the attached form with the following details.

- Your version of how the incident occurred
- The location of the incident (i.e., street names, suburb)
- The vehicles involved and their registration numbers
- The direction of the vehicles
- The points of impact on the involved vehicles
- The address of any property involved in the incident
- Any road markings (e.g., single or double lines, broken or unbroken)
- The position of any stationary objects (e.g., road signs, traffic islands)

Once you have completed the form, please return via either post or email.

- Address: GPO Box 2378, Melbourne VIC 3001
- Email: [email@debtrecoveries.com.au](mailto:email@debtrecoveries.com.au)

If you wish to discuss this matter further or require more information, please contact us on 1300 799 511. Thank you in advance for helping us progress with this claim.

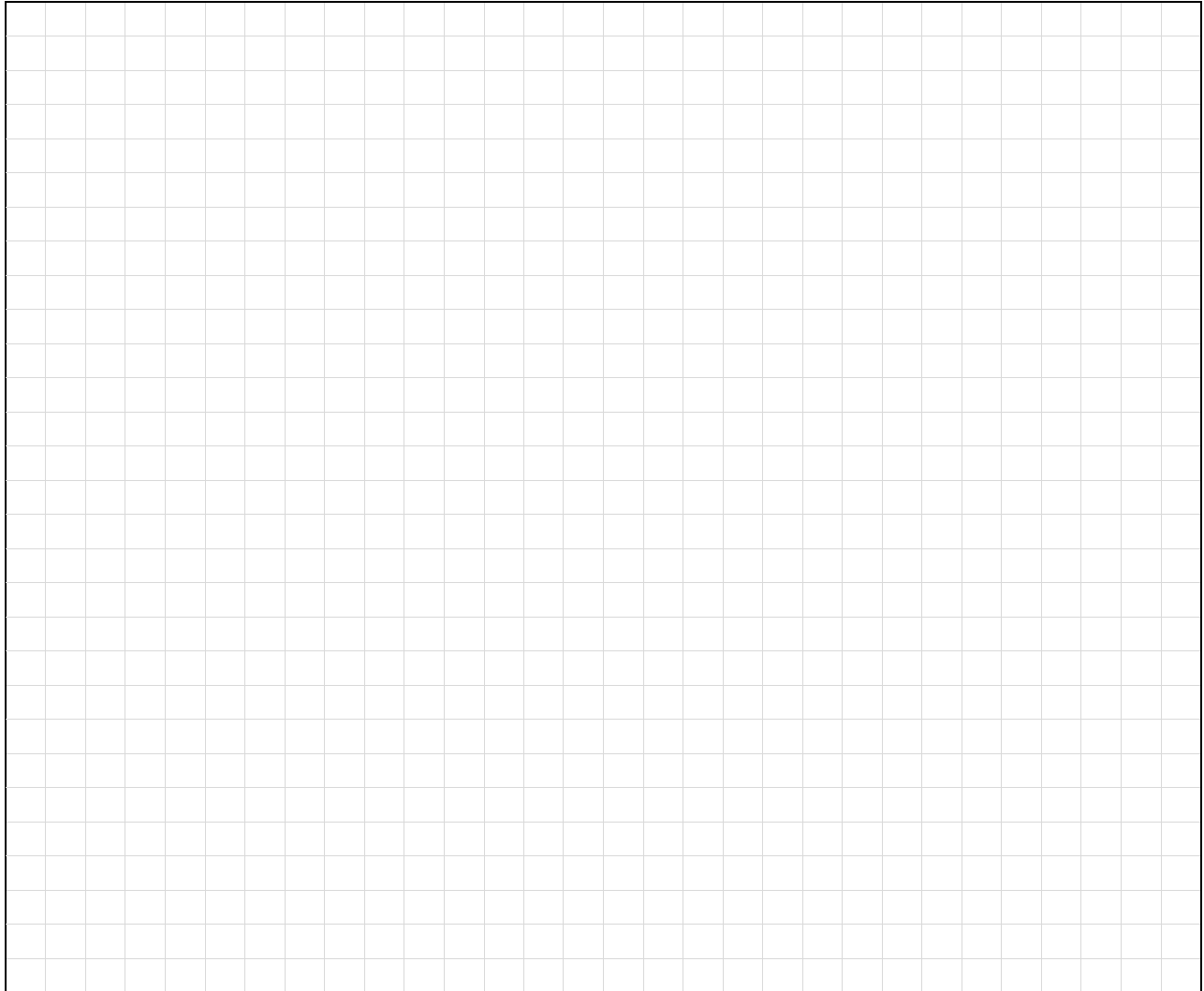
Yours sincerely,









**Debt Recoveries Australia**

Email: [email@debtrecoveries.com.au](mailto:email@debtrecoveries.com.au)  
DRA: 1300 799 511

## INCIDENT VERSION & DIAGRAM FORM

**Diagram** (show north by arrow): Please draw a sketch showing the position of all vehicles at the time of the incident.



| SYMBOLS             |   |             |   |               |   |                |   |
|---------------------|---|-------------|---|---------------|---|----------------|---|
| Street Intersection |  | Pedestrians |  | Your Vehicle  |  | Give Way Sign  |  |
| Curved Street       |  | Stop Sign   |  | Other Vehicle |  | Traffic Lights |  |

I  
me in this statement is accurate and correct.

hereby confirm the information supplied by

Signed: \_\_\_\_\_

Date:

Case Reference:

**Incident Description**

I  
me in this statement is accurate and correct.

hereby confirm the information supplied by

Signed: \_\_\_\_\_

Date:

Case Reference: