ACCIDENT AND WITNESS REPORT



Other party

Name	
Address (Residential)	Address (Business)
Tel (Residential)	Tel (Business)
Name of employer (if app.)	
Tel (employer)	

Other vehicle

Registration No	Make
Brief description of damage:	

Witness

Name	
Address (Residential)	Address (Business)
Tel (Residential)	Tel (Business)

MUA Insurance Acceptances (Pty) Ltd (Registration number 2008/011925/07) is an authorised Financial Services Provider (FSP No.: 37947) underwriting on behalf of Compass Insurance Company Limited (Pty) Ltd (Registration number 1994/003010/06), an licensed non-life Insurer and Financial Services Provider (FSP No.: 12148) EMAIL info@mua.co.za WEB www.mua.co.za

Compass Insure

Witness

Sketch of accident, including road signs, road names, position of robot and stop streets