

CASE INSTRUCTIONS

Client Name		Insured Name	
Case Coordinator		Claim Number	
Investigation Type		VMA Reference	
Job Classification		Due Date	

FACTUAL INVESTIGATION INSTRUCTION

Date:	23/06/2023
From:	
Investigation Type:	Factual Motor
Company:	
Email:	
Phone:	

POLICY DETAILS

Insurer:		
Policy Number:		
Policy Inception Date:	22/12/2022	
Subject of risk:	Vehicle Year	2008
	Vehicle Make	JAGUAR
	Vehicle Model	XF
	Vehicle Model Variant	.
	Vehicle Colour	.
	VIN	.
	Vehicle Registration	
	Vehicle State	vic
	Vehicle Condition	damaged
	Location of Damage	front
	Known or suspected previous damage	unknown
	Is all current damage related to this claim?	yes

Insured 1:	
Address:	
Suburb:	
State:	Victoria
Postcode:	3029
DOB:	
Phone:	

Insured 2:	
Address:	
Suburb:	
State:	
Postcode:	
DOB:	
Phone:	

CLAIM DETAILS

Claim Number:	
Date of loss:	19/05/2023
Date Lodged:	19/05/2023
Loss Location:	NITON /SHINY DRIVE, TRUGANINA, VIC,
Risk Exposure:	21190
Incident Description:	<p>ABC123 has impacted rear of XYZ456 - damages to front-end bumper area and bonnet of ABC123.</p> <ul style="list-style-type: none"> • What happened? Raining, front of me had stopped and put on his indicator, by mistake he pressed the brakes too hard and slid, crashing into OP • Where were you going? Home • Where were you coming from? Indian sweets shop, Gobin sweets • Any passengers in the car? No • How fast were you going? No more than 60 km/h • What was your reaction? Hit the brakes • At the time of impact was your car moving? Yes • Did you brake prior to impact? Yes • Was there only one impact? Yes • Were your lights on? Yes • Did any airbags go off? If yes, which ones? No • Were any cars towed? If yes, which ones and by who? Yes OM's car, MEND EM towing • What colour was the other vehicle? Black as well • How did you get home? Called his friend, he waited for tow truck and took him home • Are you familiar with or did you know the other party? No • Did you exchange details with the other party at the scene? If so, how? (pen & paper/photos) Took photos and wrote it in notes on his phone • Have you been in contact with the other party since the accident? If so, when? Yes, he messaged after 2-3 days for claim number • Were the police or any other emergency services contacted? If yes, did they attend? No • Did you take any photos at the accident scene? If so, could you please send them through? Yes, has not sent them through <p>Does not have any proof of purchase, but may have proof of ownership through VIC roads.</p> <p>Advised OM to provide proof of purchase or registration to continue OM agreed</p>

PARTIES TO THE CLAIM

Person 1

Name	
Role	TP (Third Party)

Person 1

Address	
Phone	
Email	

ISSUES IDENTIFIED

- Incident within 5 months of policy inception.

T-Total loss

- incident occurred in industrial area at 9pm with vehicle minimal traffic, there would have been sufficient room for OI to go around OP vehicle. unless tailgating OP.

- other suspected staged collision have occurred in this area that warranted investigation.

Insured claims it was raining which was the cause of the accident. BOM notes there was no rain that day

- scene photos shows fluid runoff as a result of the vehicle impact, which does not support "rain".

- absence of skid marks or any other road marks from scene photos(he "braked hard" and slid is in his version)

- Insured claims they were heading home from Goblin deserts. (Loss location is in the other direction from insured'shome)

- scene photos provided indicate the photos were taken after the vehicles were parked carefully next to the collision location.

INTERVIEW

Person to be interviewed:	
Association to claim:	At fault driver (insured)
Contact details:	

Interview instructions:

Movements prior/vehicle condition/details of the trip:

- Driver's detailed movement leading up to the incident
- purpose of the trip/intended destination
- where was driver headed to and coming from (route taken)
- vehicle condition prior to trip. (any prior damage/location/extent of damages/any photos?)
- vehicles occupants details and seating positions/seatbelts
- driving conditions, observations of traffic, lighting, road surface, duration of trip
- condition of driver during the trip (alert/tired/distracted)
- duration of the intended trip
- dashcam
- details of last refuel.

Collision:

- date and time of incident
- direction of travel (all vehicles involved)
- exact incident diagram (exact street location/attempt to use google satellite view)
- driver to mark on the positioning all vehicles involved prior to and post impact. (see example below)
- driver to mark the post collision path of vehicle and resting positions
- driver observations of surroundings/landmarks
- vehicle speeds (prior to collision and estimate of impact speed)
- headlights/indicator application/brake and taillights operational?)
- which lane were the vehicles travelling on prior to the collision
- when did driver first observe third party vehicle/object/animal?
(distance/position/observed speed/direction of movement)
- if following how far did he follow TP for at what distance
- driver reaction/response to third party vehicle braking.
- driver's inputs (steering/pedal), driver to demonstrate and narrate including amount of turning/rotations and accelerator brakes(gradual/full application)
- did the vehicle lockup skid/ABS sound? Prior to impact. (describe the sound)
- driver to estimate the angle and speed/location and amount of vehicle overlap at impact
- number of impact(s)/ felt/ heard
- severity of impact(s)
- vehicle rotation? Direction and amount (clockwise or anti clockwise)
- any deployment air bags, driver to describe observation.
- driver body movements, driver to narrate and demonstrate (direction of movement when the vehicle was impacted, did occupant make contact with any part of the vehicle during the impact)
- occupant injuries sustained (actions taken)
- illustrate post impact resting positioning of the vehicles.(estimate distance/direction the vehicle was facing)
- any notable debris as a result of impact and direction/position on the road

Post collision

Obtain the order of events following the collision

- movements of the vehicles/actions following collision (were the vehicles moved from resting position/who/when?)
- exchange of details (method? where/when was the details it exchanged)
- Third party occupants?
- witnesses/local residents/passers-by
- emergency services
- any scene photos? when/where were they taken
- phone calls made at the scene/who's phone
- tow truck/ who notified/ arrival time
- any associates of the driver/owner attended scene/who/what vehicle/duration it took/how were they notified
- consequence/effect of this incident.
- driver's movements/destination after incident and how did driver travelled to destination and the timeframe

Document requests:	phone bank record purchase maintenance
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INTERVIEW

Person to be interviewed:	
Association to claim:	TP Driver (insured)
Contact details:	
Interview instructions:	similar to other driver - at anypoint did he noticed the other driver was behind him? how did he observethis? his observation of TP vehicle, like how long did TP followed him for how long etc, observe the headlights etc? - did he in anyway anticipate the impact? did he realise he was going to get hit? - ask him the duration between him stopping and the impact(seconds) why did he stop? it was a non controlled intersection. (need to check against answer of other driver)
Document requests:	phone bank record purchase maintenance

SCENE CANVAS INSTRUCTIONS

canvass local businesses to check for CCTV

FORENSIC EXPERT INFORMATION

Reconstruction

LIST OF SUPPORTING MATERIALS ATTACHED

photos
case notes

REPORTING REQUIREMENTS

Please upload all reports to V-track noting the following requirements:

- FINAL REPORT TO PROVIDE SUMMARY OF INVESTIGATION ONLY - NO NEED FOR DETAILED REPORT
- Final report to include (but not limited to):
 - Details of who has been interviewed
 - Summary of anomalies (DOT POINT)
 - Points of considerations (DOT POINT)
 - List of documents received
 - List of documents outstanding
 - List of annexures / attachments
- NO NEED TO PROVIDE HARD COPY OF REPORT - PLEASE SEND **ELECTRONICALLY ONLY**
- Scanned documents to be sent electronically
- Provide large documents on a USB and post if cannot be emailed