



Thank you for completing our Accident / Incident Report Process. Incidents, accidents and vehicle thefts are not something we like to think about, especially on a business trip or vacation, but they can and do happen even to the most careful drivers.

You can typically expect to hear from Avis Budget Group in a 30 day time-frame from the date of the incident.

In the interim, please contact your Insurance Company or Credit Card Company to establish a claim with them. You do not need any paperwork from us to begin this process.

For inquiries regarding your claim, please feel free to contact Avis Budget Group at the phone number or email address below. Please be sure to provide your Rental Agreement number or MVA number listed below when contacting us to inquire about your claim.

Thank you for choosing Avis Budget Group for your rental needs.

**Rental Agreement:** \_\_\_\_\_

**MVA:** \_\_\_\_\_

**Avis 1-866-446-8376 or Budget 1-800-551-5998**  
**[fru.claimsetup@avisbudget.com](mailto:fru.claimsetup@avisbudget.com)**



### ACCIDENT / INCIDENT REPORT

#### RENTER INFORMATION (CUSTOMER)

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PHONE (PREFERRED CONTACT #): \_\_\_\_\_

VEHICLE USE  BUSINESS  PERSONAL  
(IF BUSINESS PLEASE LIST NAME OF COMPANY)

OPERATOR (DRIVER): \_\_\_\_\_

INSURANCE COMPANY INFO: \_\_\_\_\_

#### RENTAL VEHICLE INFORMATION

MVA: \_\_\_\_\_

PLATE: \_\_\_\_\_ STATE: \_\_\_\_\_

MAKE/MODEL \_\_\_\_\_

RENTAL AGREEMENT: \_\_\_\_\_

NAME OF PERSON COMPLETING FORM (Please print): \_\_\_\_\_

DATE OF COMPLETION: \_\_\_\_\_

#### TO CONTACT US:

TOLL FREE: AVIS 866-446-8376 BUDGET 800-551-5998  
EMAIL: fru.claimsetup@avisbudget.com

#### INCIDENT DETAILS

DATE OF INCIDENT: \_\_\_\_\_

TIME OF INCIDENT: \_\_\_\_\_ AM/PM

CITY/STATE/PROVIDENCE \_\_\_\_\_

WERE POLICE CALLED?  YES  NO  
IF YES, PLEASE PROVIDE POLICE DEPT / RPT#:

OTHER VEHICLES INVOLVED:  YES  NO  
IF YES, PLEASE PROVIDE:

OWNER/DRIVER NAME: \_\_\_\_\_

CONTACT PHONE #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP CODE \_\_\_\_\_

YR/MAKE/MODEL: \_\_\_\_\_

WAS ANYONE INJURED?  YES  NO  
IF YES, PLEASE PROVIDE:

PARTY INJURED: \_\_\_\_\_

CONTACT INFO: \_\_\_\_\_

#### INCIDENT DESCRIPTION

- RENTAL VEHICLE STRUCK IN REAR
- OTHER VEHICLE(S) STRUCK IN REAR
- INTERSECTION COLLISION
- PARKING LOT COLLISION/ INCIDENT
- PARKED & UNOCCUPIED
- TIRE  GLASS
- OTHER (PLEASE PROVIDE DESCRIPTION):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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(IF BUSINESS PLEASE LIST NAME OF COMPANY)

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INSURANCE COMPANY INFO: \_\_\_\_\_

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### ACCIDENT / INCIDENT REPORT

#### RENTER INFORMATION (CUSTOMER)

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

VEHICLE USE  BUSINESS  PERSONAL  
(IF BUSINESS PLEASE LIST NAME OF COMPANY)

[REDACTED]

[REDACTED]

[REDACTED]

#### RENTAL VEHICLE INFORMATION

MVA: \_\_\_\_\_

PLATE: \_\_\_\_\_ STATE: \_\_\_\_\_

MAKE/MODEL \_\_\_\_\_

RENTAL AGREEMENT: \_\_\_\_\_

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