

Vehicle Component Failure/Fire Profile & Request for Analysis

This Profile Form has been developed by Impact General, Inc. to assist the field adjuster or examiner in collecting information that will help ensure effective analysis on vehicle component failure/fire cause and origin. To request vehicle inspection, simply fill out this form as completely as possible. Fax form for immediate inspection of the vehicle. If we can be of any assistance, please call 800-688-1628.

Insured: _____ **Claimant:** _____

Claim No.: _____ Date & Time of Loss: _____

Adjuster: Mr./Ms. _____ Phone No.: _____ Fax: _____

Firm Name: _____

Address: _____

Please Address Report Attention to: Mr./Ms. _____

Shipping Address: _____

Vehicle Type _____ Two Wheel Drive _____ Four Wheel Drive _____

Year _____ Make _____ Model _____ License Plate _____

Any recent repairs made? Yes _____ No _____ Explain _____

Special Requests _____

Work Orders: _____ enclosed herewith _____ being sent _____ requested _____ not available

Vehicle Location: Facility: _____ Address: _____
Phone#: _____ Contact: _____ Lot #: _____

COMPONENT FAILURE ISSUES:

1. What did driver feel or observe prior to the accident? _____
2. Were any warning lights on dash? Yes _____ No _____ Explain _____
3. Any vibration or abnormal noises? Yes _____ No _____ Explain _____
4. Brake issue: what was the brake pedal feel? _____
5. Engine Failure: Describe failure (i.e. smoke, smoke color, vibration, noise) _____
6. Steering Issue: Describe Failure (i.e. hard to steer, normal steer, no steer, vibration) _____

FIRE CAUSATION:

7. Was the vehicle parked? Yes _____ No _____ How long before fire was noticed? _____
8. Were any warning lights on dash? Yes _____ No _____ Which ones? _____
9. Was the vehicle hard to steer? Yes _____ No _____ Explain _____
10. Did the transmission shift O.K. prior to fire? Yes _____ No _____ Explain _____
11. Did the engine misfire or run rough? Yes _____ No _____ Explain _____
12. What equipment was in use? (i.e. radio, A/C, etc.) _____
13. Was vehicle towing another vehicle/trailer? Yes _____ No _____ Climbing a grade? Yes _____ No _____
14. Where was smoke first noticed? _____
15. What color was the smoke? _____

Click the Submit button if you have Acrobat Professional. If you do not have Acrobat Professional, print the Vehicle Component Failure/Fire Profile & Request For Analysis form and fax to (714) 532-5734.
08/2005