Ph: 615.661.4101 Fax: 615.661.4106



7103 Bakers Bridge Avenue Suite 104 Brentwood, TN 37027 info@wellnesspfc.com

Personal Injury Insurance Information/checklist

Personal Auto Insurance	
>	Auto Insurance Carrier Name:
>	Claim #
>	Medical Pay allowance \$ (Must call your Auto Insurance Company to see if you have this coverage and what the Max Dollar amount is on your policyranges from \$1000 to \$25,000.
>	Adjuster's name:
>	Adjuster's Phone #:
Person at Fault Insurance: (Disregard this information if you are at fault)	
>	Auto Insurance Carrier Name:
>	Claim #
>	Adjuster's name:
>	Adjuster's Phone #: