Please print, scan, and email the signed form to: <a href="https://hcmfirstnoticeofloss@hertz.com">hcmfirstnoticeofloss@hertz.com</a> You must have the following information in order to submit the form online: date and time of the accident as well as either the rental agreement number or the license plate number and state of the Hertz, Dollar or Thrifty vehicle.

	Tod	lay's Date	∃Her		LAR, 7		Was there ar	a Iniumi as	Estalitus	
				icle Inci		Repo		i injury or	- 1	Please Circle One
r	INDICATE DAMAGED AREA OF RENTAL VEHICLE "Y"									E "X"
	Required: Please provide one or both of the following:  Must provide Rental Agreement No. or License Plate/State Rental Agreement No.						PASSENGER SIDE  PEAR  PE			
	License Plate			se Plate Stat	State					
	DENITED/DDI	ED/OUDMITTED OT A TEMENT	DRIVER SIDE							
	RENTER/DRIVER/SUBMITTER STATEMENT: EXPLAIN THE CAUSE OF DAMAGE:									
	Renter/Driver acknowledges that damage to the rental vehicle as indicated occurred during their rental of the RENTER/DRIVER/SUBMITTER SIGNATURE									
vehicle. Renter/Driver/Submitter further agrees to cooperate with HCM investigation of the incident.										
	Name (Last, First) Email									
Street Address City, State / Province, Zip Code / Postal Code										
a	Telephone No.									
Vehicle	Work: Home:				Cell:					
of	5				Phone No. Policy No.					
Renter	Name of Credit Card Issuer Card Type				Phone No.	Phone No. Claim No.				
Re	Name of Emplo	var & Addraec			TYPE OF RENTAL					
	Name of Employer & Address				Business Pleasure Insurance Replacement					
	Date & Time of Incident Location of the Incident (City, State / Province)									
	POLICE INFO	RMATION (Department, Name o	f Officer, Badge No.,	Phone No.)		F	Police Report No.			
r of Rental		Driver's Name			Driver's Ag	e Relation	to Renter		of Occupants	
	(Only if	0, 1411		07. 07	. (5 : 7:0	1 / 5 1 1 0 1		in Re		
	different from renter)	Street Address		City, St	ate / Province, Zip Co	ode / Postal Code	ŀ	Phone No.		
Driver of	irom renter)	Driver's License No. & Issue State / Province Name of Insurance Company & Agent Phone No. Policy No.								
F		Driver's Name		P	hone No	E	mail			
	Driver or	Owner's Name (if different from driver) Phone No Email								
	Owner of Other	Street Address City, State / Province, Zip Code / Postal Code Street Address City, State / Province, Zip Code / Postal Code								
	Vehicle or Property	Name of Insurance Co. & Agent Phone No.					Policy No.			
	(Vehicle no. 2) / or Owner of	=						e		
	Property)	Describe Damage to Vehicle / Property								
-								Age	Sex	
	Persons Injured								J,	
		Occupant Veh. No.	Pedestrian	Describe Injuries						

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## IMPORTANT DAMAGE RESPONSIBILITY NOTICE

In most cases, if Loss or Partial Damage Waiver was not accepted at the commencement of the rental, or you do not have other contractually provided damage coverage,\* the person whose name appears on the Rental Agreement will be held financially responsible for damage to the rental vehicle.

In many cases your own automobile insurance policy and/or some charge card companies cover damage to a rental vehicle. In order to be eligible for such benefits, you should notify your automobile insurance carrier and/or charge card company as soon as possible of a potential claim. A delay in notifying them may limit or entirely negate coverage, especially in the case of coverage provided by charge card companies.

\*Please refer to the specific terms and conditions provided to you at the time of rental to determine your specific level of damage responsibility.

## **RENTALS IN NEW YORK ONLY:**

FAILURE TO COMPLETELY AND ACCURATELY FILL OUT AND RETURN AN INCIDENT REPORT WITHIN TEN DAYS OF RECEIPT OF THIS NOTICE MAY MAKE THE AUTHORIZED DRIVER LIABLE FOR DAMAGES SUSTAINED TO THE RENTAL VEHICLE. EXCEPT WHERE THE DAMAGED VEHICLE IS DETERMINED TO BE A TOTAL LOSS AND SUBJECT TO SALVAGE, THE AUTHORIZED DRIVER OR HIS OR HER INSURER HAS SEVENTY-TWO HOURS FROM THE RETURN OF THE VEHICLE TO NOTIFY THE RENTAL COMPANY THAT HE OR SHE WISHES TO INSPECT THE DAMAGED VEHICLE. THE INSPECTION MUST BE COMPLETED WITHIN 7 BUSINESS DAYS OF THE RETURN DATE OF THE VEHICLE. IF THE AUTHORIZED DRIVER OR HIS OR HER INSURER DOES NOT REQUEST THIS INSPECTION WITHIN THE 72 HOUR PERIOD, THE AUTHORIZED DRIVER OR HIS OR HER INSURER WILL BE DEEMED TO HAVE WAIVED THIS RIGHT. IF THE RENTAL COMPANY DETERMINES THE DAMAGED VEHICLE TO BE TOTAL LOSS AND SUBJECT TO SALVAGE, SUCH 72 HOUR PERIOD FOR NOTIFICATION OR WAIVER OF THE WISH TO INSPECT THE DAMAGED VEHICLE SHALL NOT APPLY, AND SUCH RIGHT TO INSPECT THE DAMAGED VEHICLE SHALL EXPIRE TEN BUSINESS DAYS FROM THE AUTHORIZED DRIVER'S RECEIPT OF THIS NOTICE FROM THE RENTAL VEHICLE COMPANY AT THE RETURN OF THE VEHICLE OR RECEIPT OF THE FIRST MAILING OF THIS NOTICE IN THE EVENT OF THE RETURN OF THE VEHICLE BY AUTOMATION OR AFTER HOURS, UPON REQUEST OF THE AUTHORIZED DRIVER OR HIS OR HER INSURER, WE WILL PROVIDE A COPY OF OUR ESTIMATE OF THE COSTS OF REPAIRING THE DAMAGED MOTOR VEHICLE.

Customer: Please return completed form to a Company Representative or email per Submission Instructions below.

## **Vehicle Incident Report Submission Instructions**

- ⇒ Incident Reports involving damage to the **rental vehicle only** must be sent to **HCMFirstNoticeofLoss@Hertz.com**.
- ⇒ Incident Reports involving injury or death and/or damage to other vehicles or property must be sent to HCMFirstNoticeofLoss bipd@Hertz.com.
- ⇒ Any other correspondence should be emailed to HCMfirstnoticeofloss@hertz.com. Please include the rental agreement number on each page of the correspondence.