

**If applicable, please provide the following (you may email them to [moni@evrfirm.com](mailto:moni@evrfirm.com) or bring them with you to your appointment):**

- Claim information for 1<sup>st</sup> Party & 3<sup>rd</sup> Party (please include claim number, adjuster name & contact information including email address and/or fax number)
- Property Damage/Crash Scene Photos
- Property Damage Estimate
- Driver License
- Police Report/Citations
- Medical Provider Contact Information
- Medical Records/Bills
- Auto Insurance Card and Declaration Page
- Health Insurance Card
- Medicare/Medicaid Card
- Tricare Card
- Military ID