



## LEGAL INTAKE QUESTIONNAIRE

### ACCIDENT AND INJURY

#### **Client Information:**

Full Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Numbers: \_\_\_\_\_

Address: \_\_\_\_\_

County/City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

#### **1. Were you involved in an accident?**

Yes

No

**If so, please describe in detail how it happened. And describe where the accident occurred.**

---

**2. Were you injured?**

Yes            No

Please describe in detail the nature and extent of your injuries.

---

**3. Did you report the accident or injury?**

Yes            No

If so, describe who you reported the accident or injury to:

---

**4. Was there any kind of police report taken following the accident or injury?**

Yes            No

What police agency took the report?

---

Did you give a statement?

Yes            No

**5. Do you have any form of insurance?**

Yes            No

If so, what company and provide your insurance representative if possible.

Company:\_\_\_\_\_ Representative's name\_\_\_\_\_

**6. At the time of the accident were you employed?**

Yes                      No

If so, who was your employer and what kind of work did you do?

---

**7. What was your salary or rate of pay?**

---

**8. Did you miss work because of your accident or injury? If so, how much?**

Yes                      No                      Time missed: \_\_\_\_\_

**9. Have you filed a workers compensation claim related to your accident or Injury?**

Yes                      No

**10. At the time of the accident or injury were you married?**

Yes                      No

**11. What was your living situation?**

---

**12. Did you have children at the time of your accident or injury?**

Yes                      No

If so, what are their ages?

---

**PLEASE READ THIS, IT IS IMPORTANT:**

By submitting this potential client intake form you are not establishing an attorney-client relationship with GRT. We are making no commitment to take your case and we are not taking any action on your behalf. In the event that we might be interested in taking your case we will communicate with you further and gather more information. No attorney-client relationship will exist if and until you and GRT execute a comprehensive attorney-client retainer/fee agreement.

**NOTE: GRT DOES NOT DO FREE OR NO COST CONSULTATIONS OR EVALUATIONS IN MOST CASES.**

**I HAVE READ AND I FULLY UNDERSTAND THE NOTICE UPON THIS INTAKE FORM.**

**SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

# ADDITIONAL INFORMATION

REDWOOD CITY  
**888 993 1600**

GOLD RIVER/SACRAMENTO  
**916 851 1900**

MODESTO  
**209 491 4800**

FRESNO  
**559 268 7768**

SAN FRANCISCO  
**888 993 1600**