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## PRIVILEGED AND CONFIDENTIAL ATTORNEY WORK-PRODUCT

POTENTIAL CLIENT INTAKE QUESTIONNAIRE – PERSONAL INJURY

**Client Name:** 

Mailing Address:

**Telephone:** 

Email:

How did you hear about us?

What type of legal issue do you need assistance with?

Date of the incident?

Vehicle make/model for all drivers?

**Describe your injuries?** 

Was an ambulance involved? (Details)



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Was an incident report taken?

Have you seen any medical providers? Details (who, when, diagnosis, etc.)?

Do you have automobile insurance? If so, who?

Do you have health insurance? If so, who?

Are you employed?

Did you miss time from work?

What is your salary?

Are you married? If so, name of spouse?

Did you obtain the other party(ies)'s insurance information? Who is it?

Do you have any pre-existing injuries to the same areas of your body affected by this incident?

Have you consulted any other attorneys (if so, how many?)?



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Notes: