

# LOCUS IN MOTION (LIM) INSTRUCTION FORM



# photofile

SEEING IS BELIEVING

## Where did you hear about Photofile?

Please Tick

Previously Instructed  APIL Conference  AvMA Conference  MASS Conference  Internet  Mail Campaign  Word of Mouth   
Other (please specify)

## Instructing Party

Name:   
Address:   
Please provide DX address if applicable

Date:   
Reference:   
Telephone:   
Facsimile:   
Email Address:   
Other point of contact:

## Claimant Details

Name:   
Address:

Date of Birth:   
Date of Accident:   
Home Telephone:   
Work Telephone:   
Mobile Number:

Exact location of accident including grid reference if available:

Do you require your client to attend the scene with our agent?

Yes:  No:

Details of the accident including approximate speed of both parties if know – please send copies of police report and witness statements if available:

## Litigation Friend Details

Name:   
Address:   
Postcode:

Date of Birth:   
Home Telephone:   
Work Telephone:   
Mobile Number\*:   
Email Address:   
Association with client?

## Format and Quantity of Reports

Please choose from the following 2 options:

**OPTION 1: LIM video**  
Please visit our 'Services' page for details

**OPTION 2: LIM '2<sup>nd</sup> Generation'**  
Please visit our 'Services' page for details

- You will receive 2 USB sticks both containing a copy of the report plus a tutorial demonstrating the features and functions of LIM
- If you require additional copies on USB, how many copies do you require?   
A charge of £5.00 + VAT will be made for each additional copy on a USB stick.

NB. Photofile's LIM are often large files and are not suitable for emailing or copying on to disks. In the event that you need to forward them, we recommend doing so on USB sticks, via Dropbox or other file sharing software.

## Would you like to receive information in relation to any of the below products, in relation to this claim?

Scarring Reports  DVD Services  Locus Reports  DAQs  Medical Reporting  Rehabilitation   
Pagination  Triage  Digital Evidence for CICA Claims

**SUBMIT**

Please print and fax to 01285 658 108

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