SCARRING PHOTOGRAPHY 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:

Area(s) to be photographed

Special Instructions

Please state if you require a photographer of specific gender:

Is a home visit required?

Yes: ☐ No: ☐ No Preference/Client's Decision: ☐

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

- One hard copy of the report (further copies are available – see below)
- One digital copy suitable for portal via email (provided quality is not compromised due to the number of images) **NB Not suitable for printing**
- One high resolution disk suitable for printing

☐ If you require additional hard copies, how many do you need? (see below for prices)

☐ OPTION 2

- Two hard copies of the report (further copies available – see below)

☐ Do you require an additional high resolution version of the report on a disk at a cost of £35.00 + VAT?

☐ If you require additional hard copies, how many do you need?

A charge of £35.00 + VAT will be made for each additional report ordered at the time of instruction.
Copies ordered at a later date will be charged at £45.00 + VAT each.

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

Locus Reports ☐ DAQs ☐ Medical Reporting ☐ Rehabilitation ☐ Locus-in-Motion 'Classic' ☐ Locus-in-Motion '2nd Generation' ☐

DVD Services ☐ Pagination ☐ Triage ☐ Digital Evidence for CICA Claims ☐

SUBMIT

Please print and fax to 01285 658 108

Photofile Medical Ltd, Globe house, Love Lane, Cirencester, Gloucestershire GL7 1YG Tel: 01285 658 111