

accident checklist and report

When an accident happens:

- Shut off the engine
- Call the police and an ambulance if necessary
- Fill out the following accident report

Date:

Time:

Location of Accident:

Broker Information

Other Driver Information

Driver name: _____

Address: _____

City/Prov./PC: _____

Ph Bus: _____ Ph Res: _____

Drivers License: _____

Other Vehicle Information

License Plate: _____ Prov.: _____

Model: _____ Make: _____ Year: _____

Witness Information (not involved in the accident)

Name: _____

Address: _____

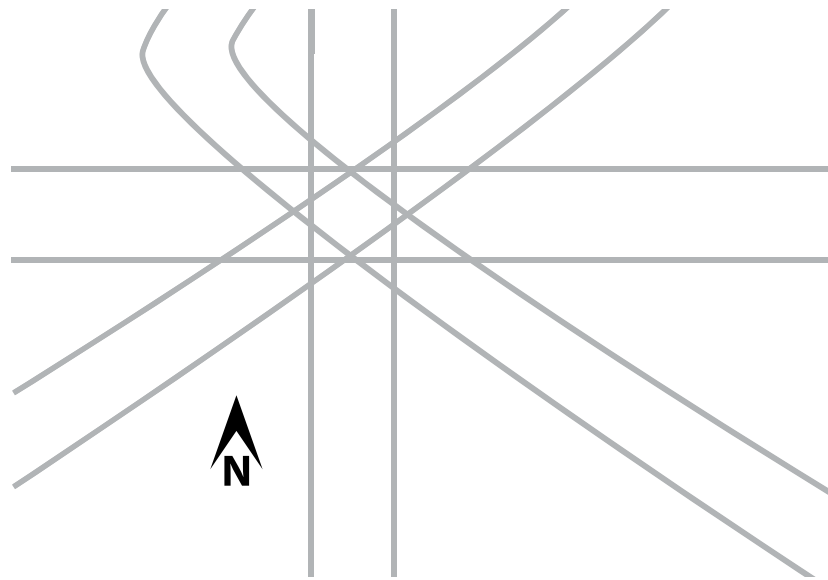
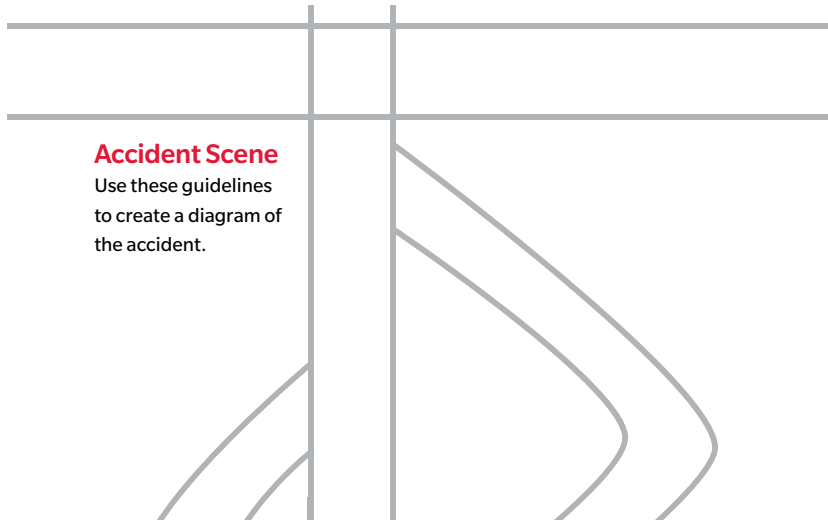
City/Prov./PC: _____

Ph Bus: _____ Ph Res: _____

Notes: _____

Accident Scene

Use these guidelines
to create a diagram of
the accident.



Notes
