

Accident Reporting Guide

FILL IN ALL BLANKS AS COMPLETELY AS POSSIBLE

DO NOT admit liability, and do not discuss your accident with anybody except your Broker or the police.

DO write down names, addresses, and licence numbers of persons involved and names and addresses of witnesses.

DO notify police immediately.

DO report accident to your Broker immediately.

OTHER VEHICLE:

Driver's Name _____
Address _____
City & Prov. _____
Phone _____
Driver's Licence No. _____
Vehicle _____
Year Make Body/Style

Licence No. _____ Prov. _____
Owner of Vehicle _____
Address _____
City & Prov. _____
Insurance Co. _____
Policy No. _____
Damage _____

WITNESSES:

1. Name _____
Address _____
City _____ Phone _____
2. Name _____
Address _____
City _____ Phone _____

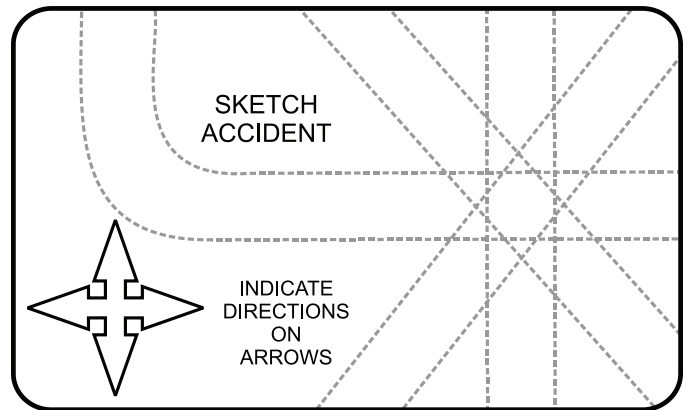
Time _____ Date _____

Place _____

Describe what occurred _____

Were Police present? Yes No

Who received ticket? _____



SHOW VEHICLES

YOURS 1

OTHER 2

INJURED PERSONS:

1. Name _____
Address _____
City _____ Phone _____
Nature & Extent _____

2. Name _____
Address _____
City _____ Phone _____
Nature & Extent _____

Ambulance Called? Yes No

YOUR VEHICLE:

Vehicle _____
Year Make Body/Style
Driver _____