

# AUTOMOBILE REPORTING GUIDE

Take precautions necessary to protect the scene from further accidents.

Do not leave the scene of the accident.

Call the police. If possible, do not move your vehicle until the police arrive.

If someone is injured, request medical assistance.

Call the fire department if there is any possibility of fire.

Give only your name, company name and address, state tag registration number and drivers license. Do not make comments about assuming liability.

Get names and contact information from any witnesses.

Notify your supervisor or company office.

## THE ACCIDENT

Date \_\_\_\_\_ Time \_\_\_\_\_ Your Vehicle No. \_\_\_\_\_  
Place of accident \_\_\_\_\_  
Other driver's name \_\_\_\_\_ Age \_\_\_\_\_  
Address \_\_\_\_\_ Telephone \_\_\_\_\_  
Lic. No. \_\_\_\_\_ Make Car \_\_\_\_\_ Year \_\_\_\_\_  
Owner of involved car \_\_\_\_\_  
Address \_\_\_\_\_  
Policeman's name \_\_\_\_\_ Shield No. \_\_\_\_\_  
Where located \_\_\_\_\_  
Was anyone arrested \_\_\_\_\_ Who \_\_\_\_\_  
What was the charge \_\_\_\_\_

## INJURED PERSONS

Name \_\_\_\_\_ Age \_\_\_\_\_  
Address \_\_\_\_\_  
Extent of Injury \_\_\_\_\_  
Where taken \_\_\_\_\_  
Name of Doctor \_\_\_\_\_  
Name \_\_\_\_\_ Age \_\_\_\_\_  
Address \_\_\_\_\_  
Extent of Injury \_\_\_\_\_  
Where taken \_\_\_\_\_  
Name of Doctor \_\_\_\_\_  
Name \_\_\_\_\_ Age \_\_\_\_\_  
Address \_\_\_\_\_  
Extent of Injury \_\_\_\_\_  
Where taken \_\_\_\_\_  
Name of Doctor \_\_\_\_\_

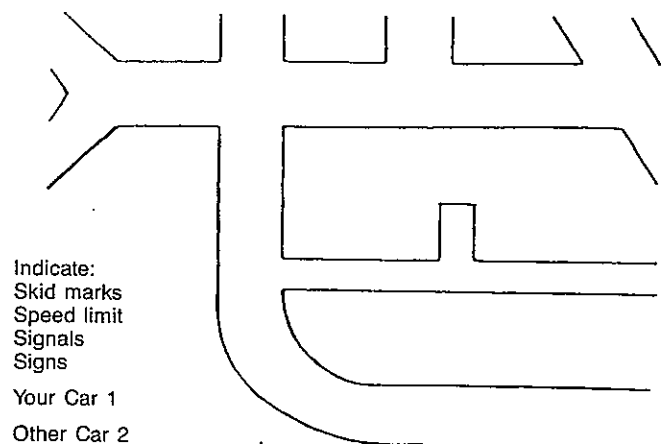
## GET WITNESSES

## DAMAGE TO PROPERTY

Owner's Name \_\_\_\_\_  
Address \_\_\_\_\_  
What was damage \_\_\_\_\_  
Extent of damage \_\_\_\_\_  
Any indication of previous damage \_\_\_\_\_  
Where is damaged property \_\_\_\_\_  
Estimated cost of damage \_\_\_\_\_

## COLLISION INFORMATION

Direction you were going \_\_\_\_\_ Speed \_\_\_\_\_  
Direction of other car \_\_\_\_\_ Speed \_\_\_\_\_  
Type of road \_\_\_\_\_ Condition \_\_\_\_\_



DESCRIBE ACCIDENT ON BACK PAGE