

# POST CAR ACCIDENT CHECKLIST ✓

**Keep this checklist in your glove box. Knowing that you are taking the proper steps to protect yourself after an accident could help you be calm in a frantic situation.**

- ☐ Get help for anyone injured, calling 911 as merited.
- ☐ Do not move an unconscious person unless his or her life is at stake.
- ☐ Move all involved vehicles out of the way of traffic.
- ☐ Turn on hazard lights, open the hood and/or set up cones, warning triangles or flares.
- ☐ Call police.
- ☐ Collect information noted in the forms below.
- ☐ Provide to the other driver(s) only the information on your proof-of-insurance card (your name, the policyholder's name, vehicle information, the insurance company's name, the agent's name and phone number, and the policy number).
- ☐ Do not allow your driver's license to be photographed.
- ☐ Safely take photos of the following:
  - Each car, including license plates and all vehicle damage
  - Each driver
  - Any skid marks
  - Location markers (landmarks, street signs, addresses)
  - Accident debris
  - Other property damage
- ☐ Draw a diagram of the accident. Show the positions of all vehicles, traffic controls, pedestrians and witnesses. Indicate the north-south and east-west streets.
- ☐ File an incident report if a police report is not filed.
- ☐ Notify your insurance agent, regardless of fault, and record the claim number.
- ☐ Ask your agent about rental car options and how repair estimates will be handled.
- ☐ Do not discuss the accident with anyone except police and your insurance agent, and do not admit fault.
- ☐ Do not agree to any settlements, from an insurance company or otherwise, without consulting an attorney who specializes in auto accidents.
- ☐ Do not sign any documents that are not from the police or your insurance agent.
- ☐ Schedule a doctor visit, even if signs of injury are not immediately apparent.
- ☐ Document whom you spoke with, and when, including all insurance company representatives, claims adjusters, police officers and other investigators. Include a summary of the conversation.
- ☐ Keep receipts for all of your related expenditures — for transportation, parking, repairs, etc.

## COLLECT THE FOLLOWING INFORMATION

### FROM THE OTHER DRIVER

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number(s): \_\_\_\_\_

Email: \_\_\_\_\_

Auto insurance company: \_\_\_\_\_

Policy number: \_\_\_\_\_

Insurance agent's name and number:  
\_\_\_\_\_

- Verify that the vehicle listed on the insurance information matches the vehicle involved in the accident.
- If ownership or insurance documentation is not provided, get the driver's license information from the other driver(s).

### FROM PASSENGERS AND WITNESSES

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: \_\_\_\_\_

### FROM POLICE

Officer's name: \_\_\_\_\_

Jurisdiction (city/county/state):  
\_\_\_\_\_

Badge number: \_\_\_\_\_

Was police report filed?: \_\_\_\_\_

Police report number: \_\_\_\_\_

Time/date of police report: \_\_\_\_\_

Tickets/citations issued: \_\_\_\_\_

### ABOUT THE OTHER VEHICLES

Make: \_\_\_\_\_ Model: \_\_\_\_\_

Year: \_\_\_\_\_ Color: \_\_\_\_\_

License plate number: \_\_\_\_\_

State of plate issuance: \_\_\_\_\_

Vehicle ID number: \_\_\_\_\_

Name of owner on registration:  
\_\_\_\_\_

Company name or logos on vehicle:  
\_\_\_\_\_

Relationship to driver (if not owner):  
\_\_\_\_\_

### ABOUT THE ACCIDENT

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Location: \_\_\_\_\_

Weather: \_\_\_\_\_

Road conditions: \_\_\_\_\_

Traffic conditions: \_\_\_\_\_

Description of what happened, including direction of travel and speed:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Description of all injuries, and emergency response information, including when police/medical personnel arrived:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Description of damage to all vehicles:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Description of damage to peripheral property (signs, trees, buildings, etc.):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_