

If you're in an accident, here are some tips to help you respond:

1. Stay calm and make sure you are safe.
2. Stop and investigate. Check to see if everyone is okay.
3. If anyone is injured, call 911 or the appropriate emergency number.
4. Collect as many witness names, phone numbers and addresses as possible.
5. Make no statement to anyone, except:
 - a. law enforcement officer
 - b. your company representative
 - c. your insurance company representative
6. Make no settlements. Do not comment or argue about the accident.
7. Do not sign any papers for anyone except for the police, your employers, or their representative.
8. Complete this worksheet at the scene or the accident.
9. Call your employer in all cases involving injury or damage.
 CALL: _____

10. Return completed accident worksheet to employer as soon as possible.

Additional Notes: _____



Commercial Automobile Accident Worksheet

Use this worksheet to note relevant details and document driver/witness information to be better prepared and stay organized.



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This worksheet does not replace required accident reports.

Accident Details

Date: ____ / ____ / ____ Time: ____ : ____ am/pm

Location: _____

Your speed at the time of accident: _____ miles per hour

What warning of signal given? _____

Road Conditions: Dry Wet Snow Ice

Name of street or highway: _____

YOUR VEHICLE

License Plate #: _____ Unit #: _____

Yr: _____ Make: _____ Model: _____

Employer: _____

Equipment (if involved): _____

YOUR INFO

Your name: _____

Driver's license #: _____ State: _____

Your phone #: (____) _____ - _____

OTHERS

Others in your vehicle at the time of the accident: _____

Investigating Officer: _____

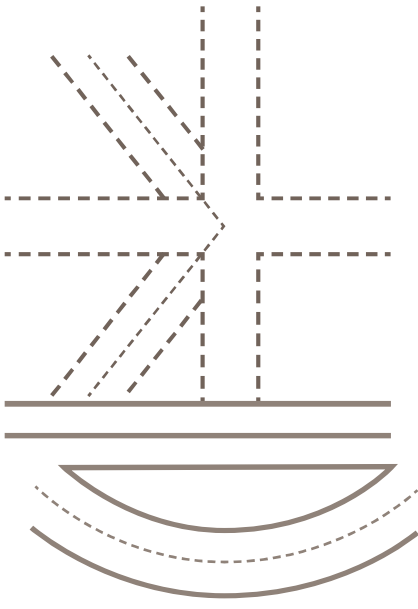
Officer badge #: _____

Station phone #: _____

Describe accident: _____

Damage to insured vehicle or equipment: _____

Use diagram to display vehicle positioning.



Information of other vehicle involved

Driver's name: _____

Driver's license #: _____ State: _____

Vehicle license plate #: _____ State: _____

Driver's Phone: (____) _____ - _____

For additional drivers, use the additional notes section on the back of this worksheet.

Witness information

1. Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ - _____

2. Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ - _____

3. Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ - _____

Photo Tips

If the scene is safe, photograph the following from the entire scene:

1. From 25' feet away, close up, in all directions
2. All sides of vehicles, damage areas, license plates, company name, DOT#
3. Any skid marks, traffic control devices, street signs, etc.