

**AUTO ACCIDENT REPORT FORM**

**PREPARED FOR MY ATTORNEY - ATTORNEY/CLIENT PRIVILEGE APPLIES**

**WHEN AN ACCIDENT OCCURS:**

**AUTO ACCIDENT GUIDE**

- NEVER talk with other driver's insurance company until you first talk with a lawyer. Never admit fault.
- If you are in prior or injured, go to the nearest emergency room or see you doctor withoutdelay. Need a medical referral? Call us!
- Get the other party's driver license number, vehicle, vehicle year, make & model, license plate number and insurance company infomation.
- Call the Police, ask them to respond and report. Police didn't despond? We can help!
- Get the names and phone numbers of witnesses to the accident. We can help locate witnesses.
- Take photos of the accident scene, your vehicle and of the other person's vehicle too. Use your cell phone camera.  
Call us if you need help gathering evidence/witness info.
- Take Photos of your injuries early, as bruises and swelling often quickly.
- Keep track of lost time from work. You may have a claim foe lost wages. Let us you make this claim
- File form SR-1 with the D.M.V. within 10 days if anyone was hurt or if property damages exceeds \$750. Call us, we can help!

**ACCIDENT DETAILS**

Day/Date/Time AM/PM	
Weather/Road Conditions	
Location of Accident	
Accident Details	

**OTHER DRIVER/VEHICLE INFORMATION**

Driver's Name:	
Driver's Address:	
Driver's Phone:	
Vehicle Make:	
Vehicle Model & Year:	
Vehicle Color:	
License Plate Number	
Insurance Company:	
Agent Name & Phone:	
Insurance Policy Number:	

**POLICE INFORMATION**

Officer Name:	
Police Agency (CHP? LAPD?):	
Phone:	
Badge Number:	
Other Info:	

**WITNESS INFORMATION**

Name:		Name:	
Address:		Address:	
Home Phone:		Home Phone:	
Work Phone:		Work Phone:	