

# Car Accident Checklist

## Steps to Take at the Crash Scene

- 1. Call 911 for medical and police help.** Be sure to **request emergency medical assistance** at the scene if needed. If you believe you need emergency treatment or the first responders recommend transport to the hospital by ambulance, accept these services. 
- 2. Tell the medical professionals all your symptoms** and do not downplay your pain. 
- 3. If you decide not to go to the hospital by ambulance, seek medical treatment as soon as possible at an emergency room, urgent care center, your doctor's office** or other treatment facility. Be sure to tell the examining doctor that you were in a car accident and describe what happened to your body in the crash. 
- 4. Exchange information with other drivers,** including names, phone numbers, addresses, driver's license numbers, license plate numbers and basic insurance information. You can use the form below. 
- 5. Report the accident to your insurance company.** But do not provide them with a written or recorded statement without the advice of your attorney. 
- 6. Keep track of any medical treatment you receive,** and make sure to note any doctors, physical therapists or other medical professionals who provide that treatment. **Follow through with the treatments prescribed by the doctor.** 
- 7. Take pictures** of any damage to your vehicle as soon as possible after the accident. Also take pictures of the accident scene and other vehicles involved before they are removed, if possible. 
- 8. Use caution when discussing the accident** and be wary of early settlement offers from the insurance company. 
- 9. Keep all receipts and bills for all medical treatments** related to the accident. 
- 10. Make daily notes about how your injuries have affected your life,** including the pain you are suffering and the activities you can no longer take part in. 
- 11. Speak with an experienced lawyer as soon as possible.** 

# Recording Information About the Accident

## Emergency Supplies

- Bottled water
- First aid kit
- Flashlight
- Blanket
- Dried/non-perishable food
- Jumper cables

Date of Accident: \_\_\_\_\_ Time: \_\_\_\_\_

Location of Accident: \_\_\_\_\_  
 \_\_\_\_\_

### Information About Vehicle 1

License Plate No.	Vehicle Year	Vehicle Make	Vehicle Model
Driver's Name	Driver's License No.	Driver's Address	
Driver's Phone	Driver's Email	Insurance Company	Insurance Policy No.

### Information About Vehicle 2

License Plate No.	Vehicle Year	Vehicle Make	Vehicle Model
Driver's Name	Driver's License No.	Driver's Address	
Driver's Phone	Driver's Email	Insurance Company	Insurance Policy No.

### Witness Contact Information

Witness #1 Name	Phone Number	Address	Email
Witness #2 Name	Phone Number	Address	Email
Witness #3 Name	Phone Number	Address	Email
Witness #4 Name	Phone Number	Address	Email

