

Accident Checklist

Prompt and detailed claim reporting controls your claim costs. Use this form to record important information from the accident.

In Case of an Accident:

- Keep Calm and Call the Police
- Note the date, time and location of the accident
- Document the scene with pictures if it is safe to do so.
- Do NOT leave the scene of the accident
- Do NOT admit responsibility at the scene
- REPORT ALL LOSSES TO YOUR AGENT IMMEDIATELY.

Record Accident Facts Below

Accident Date: _____ Time: _____ Location (Road, City, State) _____

Other Driver Name: _____ Complaints of Injury? _____

Address: _____ City: _____ State: _____

Phone Numbers: (Home) _____ (Work) _____ (Cell) _____

Other Vehicle Make: _____ Model: _____ Year: _____ Color: _____

Other Vehicle License Plate #: _____ Investigating Police Department: _____

Other party Insurance Company : _____ Policy # _____

Witness 1 Name: _____ Phone #: _____

Witness 2 Name: _____ Phone #: _____

List Passengers of ALL Vehicles:

<u>Name</u>	<u>Address</u>	<u>City</u>	<u>State</u>	<u>Telephone</u>	<u>Complaints of Injury?</u>



M&P Insurance and Investment Services

870.523.6771

833 Malcolm Ave., Newport, AR

www.mandpii.com