

ACCIDENT REPORT

GENERAL INFO

ACCIDENT DATE	CLAIM #			
ACCIDENT TIME	ACCIDENT LOCATION			
FLEET NAME	FLEET CONTACT			
BENEFICIAL OWNER OF VEHICLE	FLEET CONTACT PHONE #			
DRIVER NAME	ADDRESS			
DRIVER'S LICENSE #	PROV/STATE	PHONE # FOR DRIVER		
TRACTOR UNIT #:	TRACTOR PLATE #:	DRIVABLE - YES OR NO		
REGISTERED OWNER:	IF NOT DRIVEABLE LIST CURRENT LOCATION:			
ROUTE - ORIGIN AND DESTINATION	REPAIR SHOP NAME			
LIST VEHICLE DAMAGE:	TOW TRUCK ON SCENE? YES / NO			
	TOW COMPANY NAME:			
TRAILER 1 PLATE	PROV/STATE	DAMAGE	DRIVEABLE	LOCATION
			YES OR NO	
TRAILER UNIT #:				
TRAILER 2 PLATE	PROV/STATE	DAMAGE	DRIVEABLE	LOCATION
			YES OR NO	
TRAILER UNIT #:				
CARGO DESCRIPTION			CARGO INSURER	

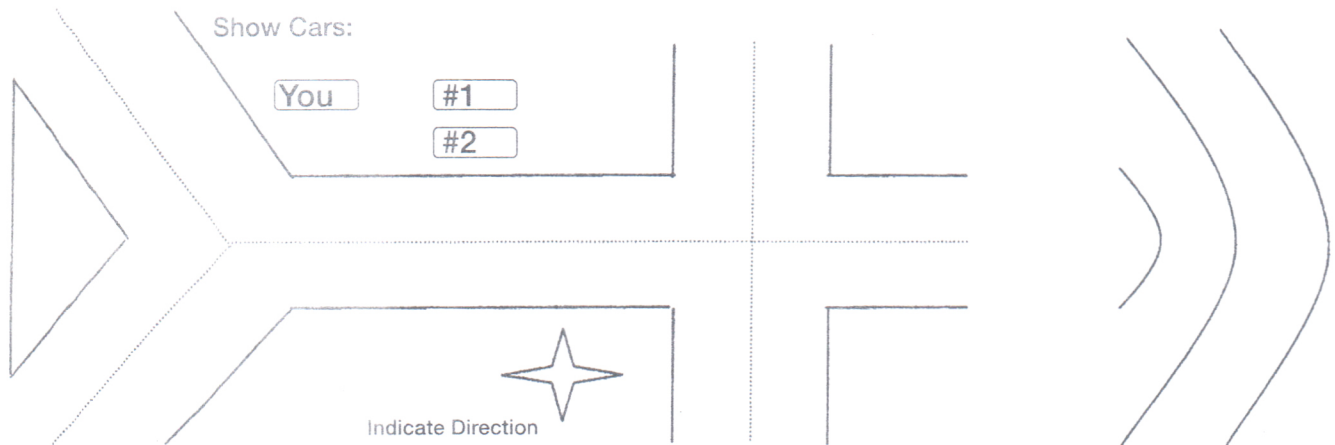
ACCIDENT REPORT

DRIVER'S REPORT

DATE OF ACCIDENT	TIME	TRAVEL DIRECTION	SPEED
CITY	PROV	WEATHER CLEAR / CLOUDY / SUNNY / RAINING / FOGGY / SNOWING / WINDY / HAIL	ROAD CONDITIONS DRY / WET / SLIPPERY / ICY / SNOW / SLUSHY
STREET TRAVELING	POLICE ON SCENE? YES / NO	POLICE FILE #	POLICE CITY
CROSS STREET	CITATION ISSUED? YES / NO	POLICE OFFICE NAME	PH #
TRAFFIC LIGHT / MODERATE / RUSH HOUR		PROPERTY DAMAGE? (FENCE, POLE, BUILDING)	

STATEMENT OF ACCIDENT

ILLUSTRATE POSITION OF CARS AT TIME OF COLLISION.



SIGNATURE	DATE
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ACCIDENT REPORT

WITNESS INFO

WITNESS NAME:	PHONE #:
WITNESS NAME:	PHONE #:

OTHER MOTORIST #1

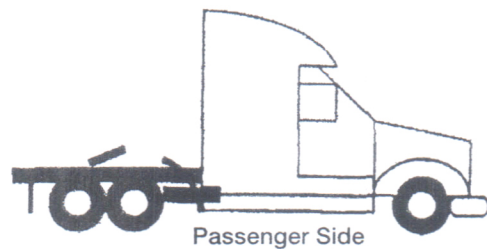
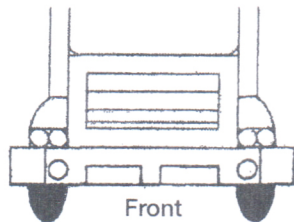
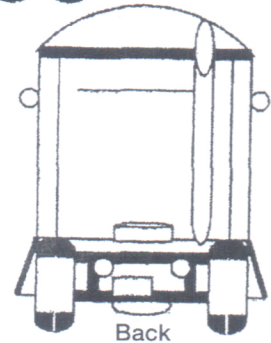
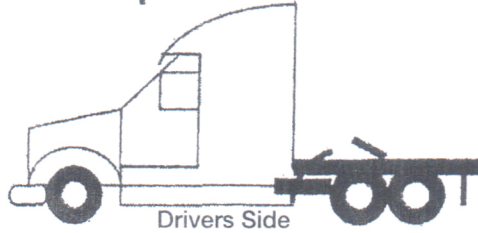
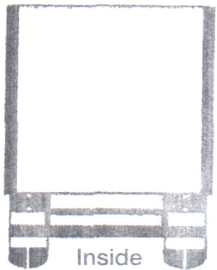
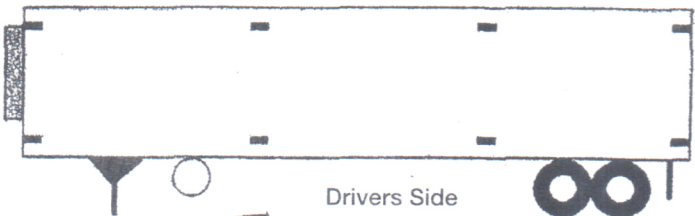
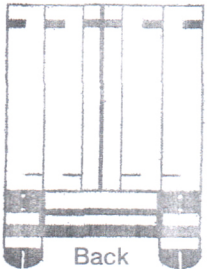
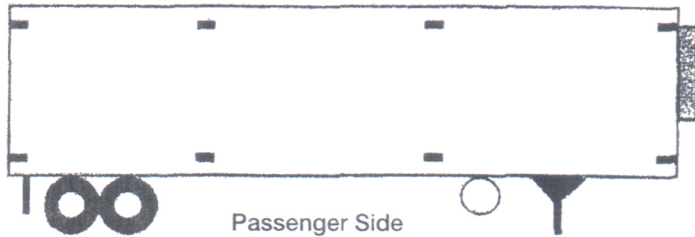
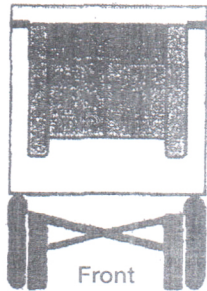
REGISTERED OWNER NAME	PH#	LICENSE PLATE	PROV/STATE
OWNER'S ADDRESS		INSURANCE COMPANY	POLICY NUMBER
DRIVER NAME	PHONE #	DRIVER'S LICENSE #	PROV/STATE
HOW MANY PASSENGERS INJURED?		DESCRIBE DAMAGE ON VEHICLE	
PASSENGER NAMES		ANY PREVIOUS DAMAGE?	

OTHER MOTORIST #2

REGISTERED OWNER NAME	PH#	LICENSE PLATE	PROV/STATE
OWNER'S ADDRESS		INSURANCE COMPANY	POLICY NUMBER
DRIVER NAME	PHONE #	DRIVER'S LICENSE #	PROV/STATE
HOW MANY PASSENGERS INJURED?		DESCRIBE DAMAGE ON VEHICLE	
PASSENGER NAMES		ANY PREVIOUS DAMAGE?	

ACCIDENT REPORT

ACCIDENT INSPECTION



S = Scrapes/Scratches

D = Dents

H = Holes

C = Crack/Cuts

M = Missing

Are you accepting liability for this accident?

YES OR NO

Please attach:

- police reports
- accident scene and damage photos
- Statement
- receipts

PICTURES OF DRIVERS LICENSE BOTH PARTIES

PICTURES OF INSURANCE & REREGISTRATION

PICTURES & VIDEO OF DAMAGES & POINT OF COLLISIONS