

Information of Other Driver

NAME: _____

ADDRESS: _____ City: _____

PHONE: (HM) _____ WRK: _____ CEL: _____

EMAIL: _____

Driver Licence Number: _____ Province: _____

Vehicle Information of Other Driver

LICENCE PLATE: _____ PROVINCE: _____

YEAR OF VEHICLE: _____ MAKE: _____

MODEL: _____ COLOR: _____

VIN: _____

Insurance Information of Other Driver

INSURANCE COMPANY: _____

AGENT: _____

POLICY NUMBER: _____

Witness Information

NAME: _____

PHONE: (HM) _____

WRK/CELL: _____

NOTE:

- Police do not determine liability; this is determined by insurance companies
- After reporting the collision to police, advise your insurance company and take direction from them.
- Charges do not necessarily equate to liability.