

Recommended information to collect after a collision

Not a legal document

YOUR INFORMATION				
Driver's Name		Owner's Name (if different from driver)		
Damage to Vehicle		Is Damage over \$2,000? Y/N	Driveable?	
No. of Passengers	Passengers' Names (list all)		Passengers' Positions in Vehicle	Injured?
OTHER DRIVER'S INFORMATION				
Driver's Name		Injured?	Owner's Name	Owner's Phone
Street Address		Owner's Address		
City, Town, or County, and Postal Code		Insurance Company	Phone	
Bus. Phone	Res. Phone		Insurance Broker or Agent	Phone
Email Address		Insurance Policy No.	Policy Expiry Date MM/DD/YY	
Drivers Licence No.		Damage to Vehicle	Is Damage over \$2,000? Y/N	
Car Make, Model	Year		Colour	
VIN		Plate No.	Driveable? Y/N	
No. of Passengers	Passengers' Names (list all)		Passengers' Positions in Vehicle	Injured? Y/N
DESCRIPTION OF COLLISION				
Date	Estimated Speed of Vehicle(s)		Weather Conditions (fog, hail, clear)	
Time	Location		Road Conditions (icy, wet, clear, debris)	
Diagram: include streets, traffic controls, visual obstacles, etc.			Light Conditions (dawn, dusk, dark, day)	
<p>[1] Vehicle 1</p> <p style="text-align: center;">↑ N</p> <p>[2] Vehicle 2</p>			Description of Collision	
AUTO COLLISION WITNESSES				
Name		Phone		
Address		Email Address		
Name		Phone		
Address		Email Address		
ATTENDING POLICE OR RCMP OFFICER				
Name		Badge No.	Division	Bus. Phone
TOW TRUCK OPERATOR				
Company		Truck No.	Bus. Phone	
Driver's Name		Address Towed To		



YOUR STEP-BY-STEP GUIDE TO FILING AN AUTO ACCIDENT CLAIM

Filing an auto claim for the first time doesn't have to be a stressful experience. With this step-by-step guide and collision report card you will know exactly what to do as well as what to expect at every stage.



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