Collision report

The following collision checklist shows you what information is required in reporting a collision:

Details of the Collision

Date:	_ Time: (a.m./p.m.)	
Weather:	_ Light:	
Exact Location:		
City and Province:		
Road Conditions: (dry, wet, muddy, sno	owy, icy, loose snow)	
Speed: Yours:	km/h Other's:	_ km/h
Direction of Travel:		
Yours:	Other's:	
Nature of Vehicle Damage		
Yours:		
Other's:		
Nature of Damage to Property:		
Your Vehicle Plate #:		
Name and Licence Number of the Otl	her Driver	
Name:		
Address:		
Driver's Licence #:		
Expiry Date:	No. of Passengers:	
Owner of Other Vehicle or Property		
Name:		
Address:		
Vehicle Plate #:		
Make/Model/Year:		
Insurance Company:		

Policy #:	
involves: a fatality, serious injury (mean drivers, unregistered or unidentified vo the other party, or suspected use of dr	ion to the police within seven days if it ning someone was hospitalized), unlicensed ehicles, failure to obtain particulars from rugs or alcohol. You do NOT need to report ustained in a collision, no matter the value
Injured Person	
1. Name:	
Address:	
Age:	Gender:
Nature of Injuries:	
Taken to:	
Injured Person	
2. Name:	
Address:	
	Gender:
Nature of Injuries:	
Taken to:	
Injured Person	
3. Name:	
	Gender:
Nature of Injuries:	
Taken to:	

Witnesses

1. Name:
Address:
Phone No.:
2. Name:
Address:
Phone No.:
Police Officer's Name and/or Badge Number:
Police File #:
Detachment Phone No.:

Collision diagram

In this space:

- outline roadway with solid lines
- indicate centre line of road
- identify all streets
- indicate North by arrow
- indicate all measurements (skid marks, road widths, etc.)

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