

WHAT TO DO IF YOU'RE IN AN ACCIDENT



CAMPISI LLP
PERSONAL INJURY LAWYERS



1 STOP If your vehicle is involved in an accident and you don't stop, you may be subject to criminal prosecution.

ASSESS 2

Call 911 if someone is injured or total damage exceeds \$1000 or the other driver under influence of alcohol or drugs.

If no one is injured or damage is less than \$1000, call local police.



3 RECORD

Take photos of the accident scene.

Obtain a written statement of who's at fault.

CLEAR THE ACCIDENT SCENE 4

Move your car to the side of the road, if able.

If unable, call a tow truck and don't get pressured to pay at a garage of their choice.

5 COLLECT INFORMATION



Fill in contact information and details listed on the reverse of this page.

Bring information to Collision Reporting Centre within 48 hours of your accident if police did not attend accident site.

CONTACT DOCTOR/HOSPITAL 6

Contact your family doctor or hospital within 24 hours if you are injured.

7 SEEK LEGAL ADVICE

Contact a personal injury law firm and find out all your options.

Always get legal advice prior to making any written or sworn statement to an insurance company.

CONTACT YOUR INSURANCE 8

Call your insurance company and tell them you were in an accident.

Do not speak to any insurance company other than your own.



ACCIDENT INFORMATION

Date: _____ Time: _____
Location of Accident: _____

WHAT HAPPENED? (Describe in your own words what happened)

POLICE CALLED: YES OR NO

Police Officer Name _____
Badge #: _____ Division #: _____
Occurrence #: _____

VEHICLE

Driver Name: _____
Driver's License #: _____ Tel #: _____
Driver's Address: _____

Owner's Name (if different than driver):

Owner's Address _____
Owner's Lic. #: _____ Tel #: _____
Make/Model of Car: _____ Year: _____ Lic. Plate: _____
Description of Damage: _____

Passengers

Name: _____ Tel #: _____
Position in Car: _____
Name: _____ Tel #: _____
Position in Car: _____

Insurance

Insurance Company: _____ Agent/Broker Name _____
Policy #: _____ Expiry Date: _____

WITNESSES

Name: _____ Tel #: _____
Address: _____
Name: _____ Tel #: _____
Address: _____
Name: _____ Tel #: _____
Address: _____

INJURIES YES OR NO

Name: _____
Nature of Injury: _____
Position (Driver, passenger, pedestrian, which car?): _____

For more detailed information on what to do after an accident, visit www.campisilaw.ca.

This information has been provided by Campisi LLP
24 Hour Hotline: 416-820-9434 Toll free: 1-855-702-3552

Print and keep this in your vehicle for reference.