

# Auto Accident Checklist

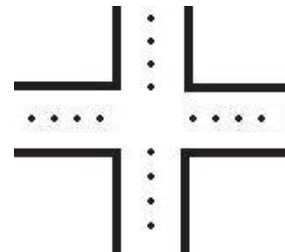
**LAZAR, AKIVA & YAGOUBZADEH**

Time of Accident: \_\_\_\_\_ Date of Accident: \_\_\_\_\_

	Vehicle 1	Vehicle 2
Driver Name		
Driver's Phone Number		
Driver's Address		
Driver's License Number		
Vehicle Make & Model		
License Plate Number		
Insurance Company		
Insurance Policy Number		
Insurance Agent		
Insurance Agent Phone Number		
Witness Name		
Witness Phone Number		
Witness Address		
Police Name		

**Accident Scene Notes**

Fill in the accident scene diagram:



Accident Location \_\_\_\_\_  
 Road Conditions \_\_\_\_\_  
 Traffic Conditions \_\_\_\_\_  
 Weather Conditions \_\_\_\_\_  
 Your speed before the accident \_\_\_\_\_  
 Other driver's speed before accident \_\_\_\_\_  
 Did your car skid? \_\_\_\_\_ How many feet? \_\_\_\_\_  
 Did the other car skid? \_\_\_\_\_ How many feet? \_\_\_\_\_  
 Impact location on your car \_\_\_\_\_  
 Impact location on other car \_\_\_\_\_  
 Anything else relevant? \_\_\_\_\_  
 \_\_\_\_\_

- If you or your passengers receive injuries, obtain medical treatment immediately. Tell medical personnel about everything you feel may be physically wrong
- Report the accident to your insurance agent immediately. Do not speak to the other driver's insurance representatives
- Avoid making statements about responsibility to other drivers, witnesses or insurance representatives. Assist the police with their official report. Confirm that you and your passengers wore seat belts.
- Take photographs of any injuries and vehicle damage
- Contact Lazar, Akiva & Yagoubzadeh  
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 Los Angeles, CA 90024  
 Toll Free: (800) 261-7001 [info@laylegal.com](mailto:info@laylegal.com)