# **Car Collision Checklist**





Keep a pen and a copy of this Car Collision Checklist in your glove box. Policyholders call 1-800-747-7642 to file a claim.

If you are aware of insurance fraud, report it to our fraud hotline at

1-800-610-6437 or cfraud@rockfordmutual.com

You can rely on Rockford Mutual and your Independent Insurance Agent when an accident occurs. With a 97% **Customer Satisfaction** Rating, your policy is backed by quality claims service providing you with the attention to detail you deserve. Our priority is to settle your claim quickly and fairly.

#### Safety

- Check to see if anyone has been injured. If so, dial 9-1-1 immediately for medical help. If you are injured, don't move and wait for help.
- ☐ Turn on your hazard lights.
- Move the vehicles, if drivable, to the shoulder or as far away from traffic as possible.
- Set up road flares and orange warning cones or reflective triangles, if available, to further warn other drivers. These should be set up in front of and behind the vehicles.
- Call the police to complete a report of the incident.

## **Collect** Information

Gather license, registration and insurance info from the other driver(s)

NAME	
DRIVERS LICENSE NUMBER	REGISTRATION NUMBER
INSURANCE COMPANY	INSURANCE NUMBER

Take a photo of their license(s), registration and insurance info, if possible. Make sure that the Vehicle Identification Number (VIN) and/or license plate is visible.

VIN NUMBER

Collect contact information for the driver(s), including home/work/cell phone numbers and an email address.

LICENSE PLATE NUMBER

HOME PHONE	CELL PHONE
WORK PHONE	

EMAIL ADDRESS

Note the make/model and year of the involved vehicle(s).

VEHICLE MAKE/MODEL

YEAR

YFAR

VEHICLE MAKE/MODEL

CLAIM NUMBER

DATE & TIME OF CALL



## Document the Collision

- Take photos or video of the scene making sure to capture all vehicle damage, the vehicle license plates, area where the collision occurred and the people involved, if it can be done safely.
- Note the date, time and location of the collision. If possible, take photos of nearby road signs or notable landmarks (e.g., gas stations, restaurants, etc.).

DATE OF ACCIDENT

TIME OF ACCIDENT

LOCATION OF ACCIDENT

- □ Take a photo of something that has the current date for proof (e.g., newspaper clipping or screenshot of website), if possible.
- Collect contact information from any witnesses.

WITNESS NAME

PHONE NUMBER

## Report the Collision

Get the responding police officer's name and badge number.

OFFICER NAME

BADGE NUMBER

Note the accident report number and a contact number to request a copy of the report.

> ACCIDENT REPORT NUMBER CONTACT NUMBER

Provide your agent with a copy of the police and/or motorist report, if available.

## File a Claim

AGENT NAME

CONTACT NUMBER

- Call your insurance agent or Rockford Mutual directly at 1-800-747-7642 to file your claim as soon as possible.
- Note the name of the insurance agent  $\square$ handling your file, date and time of the call, a contact number and the claim number.