

COLLISION CHECKLIST

A STEP BY STEP PROCESS AFTER A COLLISION

☐ 1. Ensure Safety

- Remain calm and assess your surroundings.
- If safe to do so, move vehicles out of traffic to avoid further incidents.
- Turn on your hazard lights.
- Set up emergency warning devices such as cones or triangles, if available.
- Do not stand between or directly in front of/behind vehicles.

☐ 2. Check for Injuries

- Check yourself, passengers, and others involved for injuries.
- If anyone is injured, **call 911 immediately**.
- Do not attempt to move seriously injured individuals unless they are in immediate danger.

☐ 3. Call for Help

- Call 911 for police, fire, or medical assistance if:
 - There are injuries.
 - A driver appears impaired.
 - The collision involves a hit-and-run.
 - Vehicles are undrivable or have blocked traffic.
- If no one is injured and all vehicles are drivable, proceed to the **nearest police district office** or **Collision Reporting Centre** with:
 - Driver's licence
 - Vehicle registration
 - Proof of insurance

☐ 4. Protect Yourself Legally

- Do not admit fault at the scene.
- Do not offer or accept money or make informal agreements.
- Avoid speculation or discussing the cause of the collision with others involved.
- Limit conversations to the exchange of required information.

☐ 5. Exchange and Collect Information

- Exchange the following with other driver(s):
 - Full name
 - Address
 - Phone number
 - Driver's licence number
 - Vehicle make, model, year, license plate, and VIN
 - Insurance company name and policy number
- Collect contact details of all passengers and any witnesses at the scene.
- If emergency services attend, document names, badge numbers, and division.

☐ 6. Document the Scene

- Take multiple photos of:
 - Vehicle damage from all angles
 - The scene of the collision (*including road signs, signals, and street names*)
 - Road, weather, and light conditions
 - License plates of involved vehicles
- Create a diagram or written description showing direction of travel and point of impact.

☐ 7. Report the Collision

- A police report is required by law if:
 - The combined damage exceeds **\$5,000**
 - There are any injuries
 - A criminal offense is suspected (*impaired driving, fleeing the scene, etc.*)
- Report the collision **within 24 hours** if required.
- If a tow is needed, ensure the vehicle is taken to a reputable or designated location.

☐ 8. Contact Your Insurance Provider

- Notify your insurer as soon as possible.
- Provide all relevant details, including photos and police report (*if applicable*).
- Do not delay—prompt reporting supports timely claims processing.

☐ 9. Review Your Policy and Rights

- Know that you have the right to choose the repair facility.
- Understand your coverage, deductible, and repair responsibilities.
- If there are disputes with your insurer, request clarification or initiate a formal resolution process.

PLEASE NOTE: If there are no injuries, and the vehicle(s) can be safely driven, proceed to the nearest Collision Reporting Centre with all the pertinent information gathered from the collision scene (Collision Worksheet 1, 2 and 3).

Check and assess the damage of the vehicle(s). Any combined damage that is over \$5,000 is required to be reported within 24 hours. If the collision has left your vehicle immobile, you should call a tow truck to have it taken to the nearest Collision Reporting Centre.

If there is no Collision Reporting Centre in your area, 911 will direct the local police service to your collision location.



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COLLISION WORKSHEET 1

OTHER DRIVER INFORMATION & VEHICLE INFORMATION
If more vehicles are involved, complete information on a separate sheet and attach.

DRIVER/VEHICLE 1

Name:	Phone Number(s):	
Address:	Postal Code:	City/Province:
Driver's Licence Number:	Vehicle Make/Year/Colour:	
Registered Owner:	Vehicle VIN:	
Insurance Company:	Policy Number:	
Damage to Vehicle:		
Number of Passengers <i>(list names and position in the vehicle)</i> :		

DRIVER/VEHICLE 2

Name:	Phone Number(s):	
Address:	Postal Code:	City/Province:
Driver's Licence Number:	Vehicle Make/Year/Colour:	
Registered Owner:	Vehicle VIN:	
Insurance Company:	Policy Number:	
Damage to Vehicle:		
Number of Passengers <i>(list names and position in the vehicle)</i> :		

This is for your personal use only. You will need to fill in additional forms when reporting a collision.



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COLLISION WORKSHEET 2

WITNESS INFORMATION

Name:	Phone Number(s):	
Address:	Postal Code:	City/ Province:

Name:	Phone Number(s):	
Address:	Postal Code:	City/ Province:

Name:	Phone Number(s):	
Address:	Postal Code:	City/ Province:

ATTENDING POLICE OFFICER INFORMATION

Name:	Badge Number:
Division:	Business Phone Number:

TOWING COMPANY INFORMATION

Company Name:	Driver Name:
Truck Number:	Towed To:

OTHER EMERGENCY SERVICES INFORMATION

☐ 911 called
Time Arrived: _____ a.m | p.m.

☐ EMS on the scene:
Time Arrived: _____ a.m | p.m.

Which EMS were involved?

☐ Fire Department

☐ Police

☐ Ambulance

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COLLISION WORKSHEET 3

COLLISION REPORT

Motor vehicle accidents can be very stressful. Shock and excitement can make it hard to think clearly. If you are involved in an accident, this worksheet will help to ensure you record important details about the accident at the scene. Keep this worksheet in your vehicle along with a good pen.

Date:	Time:
Location:	Weather Conditions:
Road Conditions:	Estimated Speed of Vehicle:
Description of Accident:	
Diagram of Accident:	