



What to do if you are in an accident?

1. Check to see if you or anyone is injured. Assist them if you can.
2. If there are injuries, call 9-1-1. Tell them your location, nature of the accident and extent of injuries.
3. Do not admit fault or make promises of payment.
4. Check the damage to your vehicle and surroundings.
5. Call the police and get a police report from the responding officer.
6. Take a photograph of the damage to your vehicle and other vehicles or property that has been damaged.
7. Call Makenna Metzger, your Flood and Peterson Claims Consultant, 970.266.7135, and explain what happened.
8. Determine if there are any witnesses and obtain their:
 - Full Name
 - Phone Number(s)
 - Address
9. Exchange information with the other driver. Make sure to obtain their:
 - Full Name
 - Phone Number(s)
 - Driver's License # and State
 - License Plate #
 - Insurance Information
10. Fill out the Driver Accident Report as soon as possible following the accident so the details are fresh in your mind.

Named Insured Contact Information

Name:
Phone:
Email:
Insurance Carrier:
Policy Number:

Date _____ Time _____ AM / PM
Location _____

Light Condition	daylight	dusk	dawn	dark
Weather	rain	snow	clear	fog
Road Surface	dry	wet	snow	ice
Number of Lanes	1	2	3	4+
Highway	divided			undivided

Please contact Flood and Peterson to report a claim. Send a copy of the accident report to your supervisor and claims consultant.

Makenna Metzger, Claims Administrator

970.266.7135

claims@floodpeterson.com

Insured Vehicle VIN _____
Model _____ Make _____
Year _____ Plate # _____

Was a trailer in tow? Yes / No

If yes, who is the owner? _____

VIN / Truck # _____
Model _____ Make _____
Year _____ Plate # _____

Insured Vehicle Driver

Name _____
Address _____
Driver License # _____ State _____
Personal Phone _____
Work Phone _____



Flood and Peterson

4687 W. 18th St., Greeley, CO 80634
Toll Free: 800.356.2295
Fax: 970.506.6820
www.floodpeterson.com

Other Driver(s)

Name of Owner

Name of Driver

Address

Personal Phone

Work Phone

Model Make

Year Plate #

Insured By

Policy Number

of People in Car

Type of Damage

Name of Owner

Name of Driver

Address

Personal Phone

Work Phone

Model Make

Year Plate #

Insured By

Policy Number

of People in Car

Type of Damage

Additional Information

Investigating Officer

Name

Badge #

Witness Information

Name

License Plate # state

Address

Phone Number

Description of Accident

Your Speed

Any Warning Given

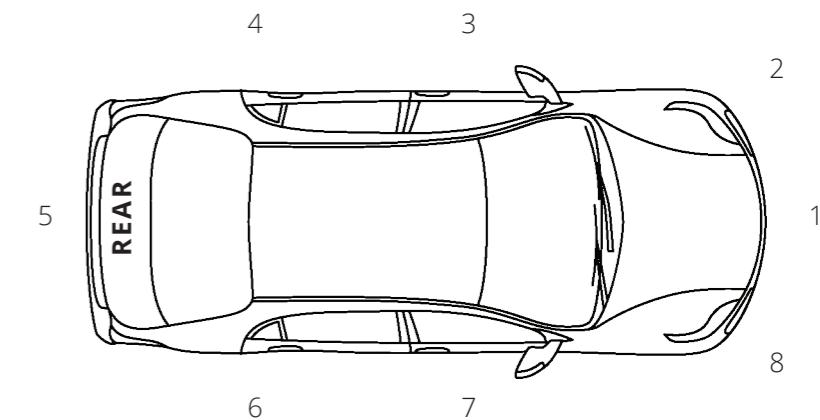
Details

Narrative

Damage to Property? Yes / No
If yes, please attach additional paperwork describing the damage in detail. Include photographs.

Diagrams

Mark the numbers closest to the damaged areas on your vehicle.



Draw a basic picture of the accident. Include street names and arrows indicating the direction of travel for each vehicle.

