

### Auto Accident Information Form

Print a few copies of this form and put with car papers. At the accident location, fill in one for yourself, and give one to the other party with your information.

Auto Accident Information Form		
Name of other party / Nombre del otro partido:		
Vehicle license plate# / Numero de la licencia del vehiculo:		
Type vehicle (year, make, color) / Tipo de vehiculo (el ano, de hacen, el color):		
Operators license # / Numero de licencia de los operadores:		
Address of other party / direccion del otro partido:		
Telephone # of other party / Numero de telefono del otro partido:		
Insurance company and agent of other party/Compania de seguros del otro partido:		
Location of other party's insurance company / Compania de seguros del otro partido:		
Witness' names, telephone #s, and address / Locatizacion de la otra compania de seguros del partido:		
Witness names	Telephone	Address