Insurance Identification Card

THIS CARD MUST BE KEPT IN THE INSURED VEHICLE AND PRESENTED UPON DEMAND

IN CASE OF ACCIDENT

1. Call 911
2. Report all accidents to Corporate Risk Management as soon as possible.
   (Email: corprisk@duke.edu and Office: 919-684-6226)

Whenever possible obtain the following information:

A. Name and address of each driver, passenger and witness.
B. Name of Insurance Company and policy number of each vehicle involved.
C. Record as much information that is available including name, license number, plate number, make, model, and year of the car, how the accident happened and information about the witnesses.
D. Action of each involved vehicle before and during the accident.
E. If possible, photos of damage to all vehicles involved and accident scene.
F. Do not make statements to anyone except police, appropriate institution personnel and Corporate Risk Management.
Auto Accident Report Form  
Keep in your Glove Box

When an accident occurs:

**First steps while at the scene**
Call 911
Do not make statements to anyone except police or appropriate institution personnel.
Do not sign any papers concerning liability. Whenever possible get as much information as possible on this report.

**Accident Details**

Day/Date/Time AM/PM
Weather/Road Conditions
Location of Accident
Accident Details

**Damage Descriptions**

Example: left front bumper and left front side panel

<table>
<thead>
<tr>
<th>Your Vehicle</th>
<th>Other Vehicle</th>
</tr>
</thead>
</table>

**Other Driver/Vehicle Information**

Owner’s Name
Owner’s Address
Owner’s Phone
Vehicle Make Model Year & Color
License Plate Number
Driver Name
Driver Address
Driver Phone

Sketch the accident scene on another sheet of paper. Attach Photos as appropriate.

Collect Witness Information

CRM(10/2021)