

## Keep Good Records

The following is a checklist of items you will need for your case. Use additional pages to elaborate.

Your Name:	
Other occupants of your vehicle: (Name, relationship and where seated)	
Day and Date of the Accident:	
Approximate Time of the Accident:	
Describe Location of the Accident: (City, state, cross streets, nearest address, etc.)	
Weather Conditions:	
Roadway Conditions: (Wet, icy, pot-holed, etc.)	
Describe how the accident occurred:	
Make, model, year of your vehicle:	
Estimate of damages: (If possible, include documentation)	
Names of other parties involved:	
Make, model, year and license plate # of other vehicles involved:	
Describe the damages other vehicles sustained: (if known)	
Were police called to the scene?	
Was a police report filed?	
Was anyone charged with a traffic violation?	
List names of any witnesses:	
Was an ambulance called to the scene?	
Describe the treatment that the paramedics provided:	
Were you taken to a hospital?	
Describe services or products provided: (i.e.; exam, x-rays, neck collar, prescription, etc.)	
Were you hospitalized? For how long?	
Did you have x-rays or other scans taken?	
What follow-up or additional treatment have you had at the hospital?	
What are the names and locations of all other health providers you have seen for your injuries?	
What are your present symptoms?	
What is your present diagnosis?	
What normal activities are you unable to do because of your injuries?	
Have you ever had similar injuries in the past 10 years? If yes, explain:	
Have you have missed time from work as a result of the accident?	
Include a list of photographs that you might have:	