



## Teller & Associates

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Our main office is near downtown, in the Madrona neighborhood of Seattle, but we are available for no obligation consultations at branch offices throughout the Puget Sound area, at times convenient for you. Give us a call with any questions.

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At this firm, you will work directly with the lawyer, not just with legal assistants.

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For more information, please visit our website at  
**[www.stellerlaw.com](http://www.stellerlaw.com)**

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Questions and comments on improving the Collision Resource Guide are always appreciated.

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## Collision Resource Guide

### Automobile Accidents Can Happen To Anyone

#### What to do and know

- ❖ At the accident scene...
- ❖ If Injured...
- ❖ About insurance...

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## Accident Scene

- ❖ Right after the impact, take the time to sit for a moment. Look around and make sure it is safe to get out of the car and move around.
- ❖ Check for injuries. Life and health are more important than damage to vehicles.
- ❖ Call police (911), even if the accident seems fairly minor. An accident report is often legally required - and you never know what the other driver will say later.
- ❖ If possible and safe, do not move the vehicles until the police arrive.
- ❖ Do not admit fault, even though you may feel bad that the accident happened. Police know the laws, and it is their job to determine fault.
- ❖ If there are any witnesses, write down name, address and phone number early, before they decide to leave.
- ❖ You may be shaken up by the crash, so don't trust yourself to sign any document at the scene, unless it is for the police.
- ❖ If the police do not respond, get contact information from the other driver directly.
- ❖ It is a good idea to have a camera in your car. Consider buying a disposable camera, before you need it, to take pictures of the location of vehicles and accident scene.

## About Insurance

- ❖ Although you may like your insurance agent, the claims adjuster's job is different.
- ❖ Remember that the role of all insurance companies, even your own, is to take in as much as possible in premiums, but pay out as little as possible in claims.
- ❖ Cooperate with your insurance company while remembering their adverse interest.
- ❖ Report the accident to all drivers' carriers. There are often many types of coverage available to pay for your losses.
- ❖ Even if you have medical insurance, open a PIP claim if coverage is available. PIP is primary and must be exhausted before other medical insurance will pay.
- ❖ If the at-fault driver is not insured, or the accident is very serious, open a UIM claim with your own insurance company.
- ❖ Do not give a recorded statement to the other driver's insurance company or sign any documents without legal advice.
- ❖ Remember that talking to a lawyer about your claim is usually free, and most lawyers will let you know if it would be in your best interest for you to handle the claim on your own.

## If Injured

- ❖ Seek immediate medical evaluation and treatment. Insurance companies always claim a lack of immediate treatment means no injury, and connective tissue damage often hurts much more a few days later. If you are hurt at all, see a doctor.
- ❖ Follow-up with continuing treatment as required or recommended.  
This includes:
  - Chiropractic Care
  - Your Physician
  - Physical Therapy
  - Massage Therapy
- ❖ If your insurance company requests a statement, be careful what you say. The insurance adjuster may try to get you to minimize the injuries on tape or in writing.



## Other Driver Information

Other Driver's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No.: \_\_\_\_\_

Driver Lic. No.: \_\_\_\_\_

License Plate: \_\_\_\_\_

Vehicle Year, Make, Model: \_\_\_\_\_

Insurance Company: \_\_\_\_\_

Policy No.: \_\_\_\_\_

## Accident Information

Date of Accident: \_\_\_\_\_

Time of Day: \_\_\_\_\_

Exact Location: \_\_\_\_\_

City: \_\_\_\_\_

Weather Conditions: \_\_\_\_\_

Your Direction of Travel & Street: \_\_\_\_\_

Other Driver's Direction of Travel & Street: \_\_\_\_\_

Description of Accident: \_\_\_\_\_

Officer's Name: \_\_\_\_\_

Case/Report No.: \_\_\_\_\_

Witnesses (Names, addresses, phone numbers): \_\_\_\_\_

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