

**WASHINGTON POLICE DEPARTMENT
Private Property Crash Information Form
115 W. Jefferson Street
Washington, Illinois 61571
Telephone: (309) 444-2313 (non-emergency line)**

Information exchange is required by law for all traffic crashes. The purpose of this information is to provide the parties involved in a motor vehicle crash a convenient means to exchange pertinent information.

- Please complete this form with information about the **OTHER DRIVER** and the **OTHER** vehicle involved in the crash.
- You should make sure that the other involved driver(s) complete a form for your information. This self-reporting form is a service provided to persons involved in non-injury private property crashes.
- This form is for you to retain, and it will **NOT** be kept on file at the Washington Police Department.
- This form is to aid you in documenting OTHER driver's information. Do not write your information on this form.
- To ensure legibility, it is recommended that each driver uses a form to print the other driver's information.
- You may use the notes section of this form to explain the events of the collision.
- You may use the back of this form if you wish to draw a diagram of the crash, or to indicate further information for your own records.

It is your responsibility to provide your insurance company with the information that you receive.

PRIVATE PROPERTY CRASH INFORMATION FORM					
Location of Crash		Date of Crash		TIME A.M. / P.M.	
DRIVERS FULL NAME		Address (Complete)			
		City, State & Zip Code			
Drivers' License Number		Type of License (Circle one of the following)		State	
		<input type="checkbox"/> DRIVER <input type="checkbox"/> COMMERICAL <input type="checkbox"/> PERMIT			
Other Driver's Telephone Number Home:		Other Driver's Work Telephone Number & Location			
Cell:					
Vehicle Make		Vehicle Year	Model	Vehicle License Number & State	Vehicle Style & Color
Owner's Full Name		Address (Complete)			
		City, State & Zip Code			
Owner's Telephone Number HOME:		Insurance Policy Number		Policy Period	
WORK:					
Liability Insurance Company (NOT AGENT)		Insurance Company Telephone Number:			
NOTES:					