

# QLD GLOVEBOX ACCIDENT REPORT FORM

Is anybody trapped or injured?

**IF SO CALL 000**

Do any drivers appear affected by alcohol, drugs or has anyone involved failed to exchange details?

**IF SO CALL POLICELINK 131 444**

Record your insurance details prior to putting this form in your glove box

Rego no:  State:

Insurer/  
policy  
number

Driver  
name:

Licence  
number:  State:

## CRASH DETAILS

Time:  am / pm Date:  /  /20

Street:

Cross street or landmark or nearest street number:

Suburb:

## VEHICLE 1

Rego no:  State:

Make:  Model:

Driver  
name:

Driver  
address:

Licence  
number:  State:

Phone:

Owner  
name:

Owner  
address:

Insurer/  
policy  
number



**TAYLORS**  
SOLICITORS

1300 DAVID T (328 438)  
[www.taylors.net.au](http://www.taylors.net.au)  
[inbox@taylors.net.au](mailto:inbox@taylors.net.au)

# QLD GLOVEBOX ACCIDENT REPORT FORM

## VEHICLE 2

Rego no:	<input type="text"/>	State:	<input type="text"/>
Make:	<input type="text"/>	Model:	<input type="text"/>
Driver name:	<input type="text"/>		
Driver address:	<input type="text"/>		
Licence number:	<input type="text"/>	State:	<input type="text"/>
Phone:	<input type="text"/>		
Owner name:	<input type="text"/>		
Owner address:	<input type="text"/>		
Insurer name:	<input type="text"/>		
Policy number:	<input type="text"/>		

## WITNESSES

Name:	<input type="text"/>
Email address:	<input type="text"/>
Phone:	<input type="text"/>
Name:	<input type="text"/>
Email address:	<input type="text"/>
Phone:	<input type="text"/>

## OTHER DETAILS

Estimated speed of both vehicles:

Road and weather conditions:

Description of damage:

If your vehicle required towing, report the crash within 24 hours to the Police, either by calling 131 444, online or by attending your local Police Station. Make sure to keep a record of the QPN (report number).



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