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WASHINGTON STATE DEPARTMENT OF LICENSING

# Motor Vehicle Collision Claim for Damages

You can use this form to report uncompensated damages that are the result of a collision caused by an uninsured driver. The damages must have been at least $700 to property or there must have been an injury. If the uninsured driver fails to pay, we could suspend their driver license.

Be sure you provide:

- the cost of all damages. If you don't know the cost, give an estimate. We cannot take action if you use words like "unknown" or "pending."
- documentation to support your claim, such as copies of receipts, estimates, etc.

Complete this form within 180 days of the collision and mail it and any additional attachments to:
**Accidents, Department of Licensing, PO Box 9030, Olympia WA 98507-9030**

## Collision information

| Date of collision | Collision report number |
|---|---|
| Place where collision occurred *(city/town and intersecting street/road or non-intersecting street name)* | |

## Vehicle damage

| Plate number | Year | Make | Cost of repair or replacement $ |
|---|---|---|---|
| Name of owner | | | |
| Mailing address | | | |
| City | State | ZIP code | |

## Personal property damage

| Name of property owner | Cost of repair or replacement $ |
|---|---|
| Mailing address | |
| City / State / ZIP code | |

## Personal injury

| Cost of medical treatment (include future estimates) $ | Wage loss due to injury $ |
|---|---|
| Name of injured party | |
| Mailing address | |
| City / State / ZIP code | |

**Insurance/Attorney -** Complete this section if you are represented by an attorney or insurance company.

| Representative name | (Area code) telephone number |
|---|---|
| Name of company | Claim number |
| Mailing address | |
| City / State / ZIP code | |

*I declare under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

Date and place

X
Signature of claimant

*The Department of Licensing has a policy of providing equal access to its services.*
*If you need special accommodation please call (360) 902-3900 or TTY (360) 664-8885.*