



NIH Driver Vehicle Collision Information Exchange Form



For use by citizens following a vehicle collision on or near NIH property.

Incident Details

Date:	Location:	Time:	NIH Police Case #:

Driver Information

Field	Your Info	Other Driver's Info
Driver's Name		
Phone		
Street Address		
Driver License # / State		
Email		

Vehicle Information

Field	Your Vehicle	Other Vehicle
Vehicle Registered To		
Make / Model / Color		
Year / Tag #		
Insurance Company		
Policy #		

Additional Details

Witnesses / Notes / Diagram:

Maryland Transportation §20-104 – Duty to Give Information and Render Aid
Drivers involved in a collision that causes injury, death, or property damage must:

1. Provide their **name, address, and vehicle registration** to others involved; and
2. Show their **driver's license** upon request.