

### THE ACCIDENT

Date: 3-16-2016 Hour: 1715  A.M.  P.M.

Location: 6416 Whites town Pkwy

On which side of the street were you? North

Driving which way? West in Lane 2

How far from curb? NA

Did you sound horn?  Yes  No

Were your lights lit?  Yes  No

Condition of weather: Clear and sunny

Road conditions: Dry

Describe how accident occurred:

Ladder 72 was returning to Station 72 after working out at the Villa Apartments. Ladder 72 was stopped at the red stoplight (several cars back.. heavy traffic). The light turned green and we were immediately rear ended. L72 had not started moving forward after light turned green due to cars in front of us still being stopped. OIC Lt. Cunningham immediately notified dispatch and exited truck finding a total of four cars involved (including L72). One patient was transported to St. Vincent, 3 accident cards were obtained.

### DAMAGE TO PROPERTY OF OTHERS

Name of owner: \_\_\_\_\_

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

Name of driver: \_\_\_\_\_

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

Driver's License No.: \_\_\_\_\_

Name of Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Nature of Damage: \_\_\_\_\_

Name of owner: \_\_\_\_\_

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

Name of driver: \_\_\_\_\_

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

Driver's License No.: \_\_\_\_\_

Nature of Damage: \_\_\_\_\_

### INJURED PERSONS

Name: \_\_\_\_\_

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

Nature of injuries: Neck Pain

Where taken after accident: St. Vincent 86th street

By Whom: Whites town M71

Attending Physician: \_\_\_\_\_

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

Name: \_\_\_\_\_

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

Nature of injuries: \_\_\_\_\_

Where taken after accident: \_\_\_\_\_

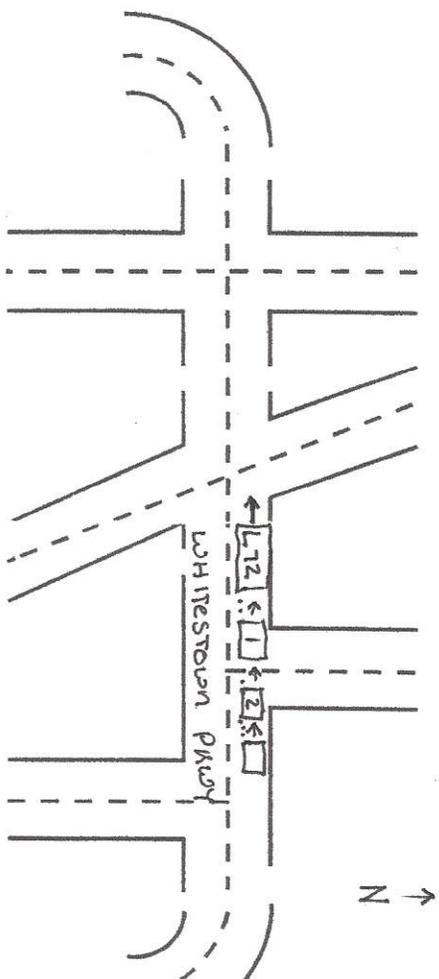
By Whom: \_\_\_\_\_

Attending Physician: \_\_\_\_\_

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

## ACCIDENT DIAGRAM

Show names of streets, locations of vehicles, travel directions of vehicles, and prominent objects. Clearly indicate the direction of North.



### INSTRUCTIONS:

1. Use solid line to show path of vehicle before accident. \_\_\_\_\_
2. Use dotted line to show path of vehicle after accident. . . . . \_\_\_\_\_
3. Number each vehicle and show direction of travel with an arrow. \_\_\_\_\_ 1
4. Show pedestrians with an X. \_\_\_\_\_

### Police Officer Information

Accident Report Number \_\_\_\_\_

Officer Name(s) & Badge Number(s) \_\_\_\_\_

Dan Boutwell \_\_\_\_\_

Ben Rutledge \_\_\_\_\_

## ACCIDENT REPORT FORM

Keep this form in your vehicle. Complete the report in case of accident and return promptly to:

### DRIVER'S RESPONSIBILITY

Any driver involved in a traffic accident is responsible for completing an accident report. Following an accident, the driver must contact the Fleet Manager and collect all information requested on the accident report form. Even minor incidents should be brought quickly to management's attention in order to protect against potential claims.

Your accident report and conduct at the accident scene is very important. What is said and done at the accident scene can either help or hinder the successful settlement of an accident case. All drivers must know and understand what to do and say, and be equipped to handle situations as they arise.

The following steps should be taken at the scene of a traffic accident in which you are involved:

1. Stop the vehicle immediately and shut off engine. Failure to stop at the scene of an accident in which you are involved is a criminal offense which may subject you to the penalty of the law in addition to disciplinary action by your employer.
2. Turn on the 4-way flashers and (if available) set out emergency markers (reflectors or flares) in accordance with DOT regulations — one marker 100 feet in each direction from the scene and one near the scene. If the accident occurs near a curve or hill crest, set the markers further away, but not further than 500 feet from the scene.
3. Assist any injured person, but DO NOT move them unless absolutely necessary to prevent further injury (i.e., from fire). Keep any injured person as warm and quiet as possible while waiting for the arrival of emergency personnel.
4. See that help, such as police and ambulance are summoned to the scene.
5. If you are the victim of a hit-and-run, or if the other party of an accident refuses to remain at the scene or give you information, notify the police and give them all the details you can. This way, your report is kept on the police log and protects you if the other party tries to make a claim against you at a later date.
6. Be polite. Provide only the information on your drivers license and the insurance card in your accident packet. Do not offer information concerning the accident to anyone except the police.
7. Complete the accident report form and return it to the Fleet Manager as promptly as possible. The following information must be recorded.



Provided compliments of:

**Insurance Companies**

**SUBMIT**

## TO PASSENGERS AND OTHERS

My employer requires that I report details of all accidents. If you witnessed this one, please assist me by writing your name below. Write a brief description of your version of the accident on the reverse side, even if you consider me at fault.

Name Josh Caudill

Home Address 824 W Walnut Greenfield Tel. 317-372-7042

Business Address WFD Tel. 317-769-3300

Date 3-16 20 16



