

LIABILITY ACCIDENT NOTICE

Auto Other

DEPARTMENT		SECTION		LOC. CODE		DIRECTOR		
DIVISION		REGION		LOC. NAME		SUPERVISOR		
STATE EMPLOYEE		STATE EMPLOYEE		STATE EMPLOYEE		STATE EMPLOYEE		
LAST NAME		FIRST NAME		INITIAL		SPECIAL I.D. OR SOCIAL SECURITY NO.		
ADDRESS			ZIP		RESIDENCE PHONE		BUSINESS PHONE	
WHERE CAN EMPLOYEE BE CONTACTED?						WHEN?		
ACCIDENT		ACCIDENT		ACCIDENT		ACCIDENT		
DATE & TIME OF ACCIDENT OR LOSS A.M./P.M.		LOCATION OF ACCIDENT (INCLUDING CITY & STATE)				POLICE TO WHOM REPORTED		
DESCRIPTION OF ACCIDENT OR LOSS (USE REVERSE, IF NECESSARY)								
STATE VEHICLE - AUTO ONLY		STATE VEHICLE - AUTO ONLY			STATE VEHICLE - AUTO ONLY			
VEHICLE NO.	YEAR	MAKE		MODEL	VIN (VEHICLE IDENTIFICATION NO.)		PLATE NO.	
STATE OWNED <input type="checkbox"/> OR LEASED <input type="checkbox"/>		ADDRESS OF LESSOR					PHONE	
NAME OF DRIVER		AGE	ADDRESS OF DRIVER				PHONE	
WAS DRIVER A STATE EMPLOYEE? YES <input type="checkbox"/> NO <input type="checkbox"/>		PURPOSE OF USE				USED WITH PERMISSION? YES <input type="checkbox"/> NO <input type="checkbox"/>		
DESCRIBE DAMAGE				REPAIR ESTIMATE \$	WHERE CAN VEHICLE BE SEEN?		WHEN?	
PROPERTY DAMAGE		PROPERTY DAMAGE			PROPERTY DAMAGE			
OWNER		ADDRESS					PHONE	
OTHER DRIVER () SAME AS OWNER		ADDRESS					PHONE	
DESCRIBE PROPERTY (IF AUTO: MAKE, YEAR, PLATE NO.)		OTHER CAR OR PROPERTY INSURED YES <input type="checkbox"/> NO <input type="checkbox"/>		COMPANY OR AGENCY NAME & POLICY NO.				
DESCRIBE DAMAGE				REPAIR ESTIMATE \$	WHERE CAN CAR BE SEEN?			
INJURED		INJURED		INJURED		INJURED		
		AGE	STATE VEH. PASS	OTHER VEH. PASS	PED.			
NAME	ADDRESS		PHONE	EXTENT OF INJURY				
CLAIMANT: NON-AUTO		CLAIMANT: NON-AUTO			CLAIMANT: NON-AUTO			
OCCUPATION		EMPLOYED BY			ADDRESS OF EMPLOYER			
PROBABLE DISABILITY WEEKS	RETURNED TO WORK <input type="checkbox"/> YES <input type="checkbox"/> NO		WHY ON PREMISES			STATE VEH.	OTHER VEH.	OTHER
WITNESS		WITNESS		WITNESS		WITNESS		
NAME		ADDRESS			PHONE			
REMARKS								
DATE		REPORTED BY		REPORTED TO		SIGNATURE (PREPARED BY)		