



CITY OF WINCHESTER, VIRGINIA

Finance Department
 15 North Cameron Street
 Winchester, VA 22601
 540-667-1815
 TDD 540-722-0782
 Fax 540-723-0238

EMPLOYEE VEHICLE ACCIDENT REPORT FORM

FOR AUTO LIABILITY INSURANCE PURPOSES
 & ACCIDENT REVIEW BOARD DOCUMENTATION

Dear Supervisor:

In an effort to thoroughly collect vehicular accident information, your time and effort is necessary in documenting the events of your supervised employee during their incident.

Thank you for your assistance.

CITY DRIVER INFORMATION	
Name of City Employee:	SS Number:
	Date of Birth:
Department:	Supervisor:

CITY VEHICLE & INCIDENT INFORMATION:		
Date of Accident:	Time of Accident:	Vin#:
Vehicle Make:	Year & Model:	License Plate:
Location of Accident:		
Description of the Accident (Use the back of this report to draw a diagram of the accident w/ streets, orientation of the vehicles and any other details necessary to depict the accident scene):		
Description of Damage:		
Estimated Dollar Amount of Damage: \$		

← Over →

OTHER DRIVER & VEHICLE INFORMATION:		
Name of Driver:		Vehicle Owner Name:
Vehicle Make:	Year & Model:	License Plate:
Address of Owner:		SS#:
		Phone Number:
Name of Insurance Company:		Insurance Policy Number:
Description of Damage to Other Property:		
Estimated Dollar Amount of Damage: \$		

Drug and Alcohol Testing:

Any City employee who is the driver of a City owned vehicle and involved in an accident or City employee who is the driver of a personal vehicle involved in an accident while on City business will perform a drug and alcohol test under any one of the following conditions:

1. A City employee is the driver of the vehicle or equipment and is charged by the Police
2. A fatality occurs
3. A person receives immediate medical attention away from the scene of the accident
4. Any vehicle or equipment must be towed
5. A transit vehicle is involved and must be removed from revenue service.

Questions / Returning the Form:

Please return this form immediately following an accident to Steven Corbit, Purchasing / Risk Manager. If you have any questions, please call 667-1815 x1477.