

County of Fluvanna

Form 7.3 - VEHICLE ACCIDENT REPORT

CALL LAW ENFORCEMENT TO REPORT THE ACCIDENT

Complete report as fully as possible immediately following an accident and submit to HR Office within 24 hours.

| Section A – COUNTY VEHICLE INFORMATION | | |
|---------------------------------------------------------------------|-------------------------------|----------------------------------|
| Accident Date | Time | Location of Accident |
| License Plate # | Vehicle Year, Make, and Model | Last 6 of VIN |
| Where is the vehicle now? | | Estimated Vehicle Repair Cost |
| Describe Vehicle Damage | | TAKE PHOTOS OF THE DAMAGE |
| Section B – COUNTY DRIVER/ EMPLOYEE | | |
| Name of Driver (Last, First MI) | Work Phone | Home Phone |
| Address | | |
| Driver's License Number and State of Issue | Date of Birth | |
| Department | Supervisor | |
| Section C – OTHER VEHICLE OR PEDESTRIAN INFORMATION (If applicable) | | |
| Name of Driver/Pedestrian (Last, First MI) | Work Phone | Home Phone |
| Address | | |
| Driver's License Number and State of Issue | Date of Birth | |
| Vehicle License # / State | Vehicle Year, Make, and Model | Last 6 of VIN |
| Where is the vehicle now? | | Estimated Vehicle Repair Cost |
| Describe Vehicle Damage | | TAKE PHOTOS OF THE DAMAGE |
| Insurance Information | | |

Section D – VEHICLE OWNER’S INFORMATION

(If different than Section C above)

| | | |
|----------------------------------------|----------------------------------|------------|
| Name of Vehicle Owner (Last, First MI) | Work Phone | Home Phone |
| Address | | |
| Describe Vehicle Damage | TAKE PHOTOS OF THE DAMAGE | |
| Insurance Information | | |

Section E – DAMAGE TO PROPERTY OTHER THAN VEHICLE(S) (If applicable)

| | | |
|----------------------------------------|----------------------------------|------------|
| Name of Vehicle Owner (Last, First MI) | Work Phone | Home Phone |
| Address | | |
| Describe Damage | TAKE PHOTOS OF THE DAMAGE | |
| Insurance Information | | |

Section F – DESCRIPTION OF HOW THE ACCIDENT OCCURRED

Fully describe the accident, circumstances, road conditions, etc.