



**MOTOR VEHICLE USE PROGRAM
ACCIDENT FOLLOW-UP CHECKLIST**

Physical Plant Fleet Coordinator is to complete this checklist and forward to Risk Management Services within two work days of being advised of an on-the-job accident that occurred while driving on state business.

DRIVER INFORMATION	
NAME	DEPARTMENT
DATE OF ACCIDENT	Frequency of driving on state business <input type="checkbox"/> Weekly or more often <input type="checkbox"/> Infrequently

CHECKLIST

- Meet with the Driver to discuss the details of the accident.
- Did the driver meet the following requirements? Yes No

Requirement	Date
Obtain all necessary information at the scene	
Call loss into 1-877-656-7475 or Physical Plant within 48 hours	
Respond to any acknowledgements or requests sent by DOAS RMS	
Obtain the police report, if requested, and forward to Physical Plant	

- Discuss appropriate corrective action, depending on whether the driver was cited for the accident.

Recommendation	Date
On-line defensive driving course at employee's expense	
View an appropriate driver safety video	
No further action warranted	

- Forward to College Accident Review Panel for the following determinations:
 - Preventable
 - Non-Preventable
 - Additional Recommendations
- Forward copy to Human Resources for placement in the employee's personnel file.

FLEET COORDINATOR INFORMATION

Printed Name	Signature
Date	