



MOTOR CARRIER ACCIDENT REPORT

Motor Vehicle Use Only

No. \_\_\_\_\_ Date Rec'd: \_\_\_\_\_ Amended Report: \_\_\_\_\_

PLEASE PRINT

Date of Accident: Day of Week: Time of Accident (Military): City/Town: County:

General Instructions: Complete this form for EACH qualifying vehicle if the crash meets the criteria on the back of this form.

QUALIFYING INFORMATION:

This form is being completed because this vehicle is: Check One:

- A truck of truck combination >10,000 lbs. GVWR/GCWR
A bus with seats for 9 or more persons, including driver.
A vehicle of any type (auto, light truck, van, 10,000 lbs. or less) with a hazardous materials placard.

Number Of:

- Total involved vehicles in the crash:
Persons sustaining fatal injuries:
Injured persons transported for immediate medical treatment:
Vehicles towed from scene due to disabling damage:

At the time of the crash, THIS vehicle was:

- Operating on a Traffic way open to the public (In-Transport)
Parked on or off the Traffic way

VEHICLE INFORMATION

Vehicle Configuration Enter one code from below

- 1 Passenger Car (only if vehicle has Hazardous Materials Placard)
2 Light Truck (only if vehicle has Hazardous Materials)
3 Bus (seats for 9-12 people, including driver)
4 Bus (seats for 16 people or more, including driver)
5 Single-Unit Truck (2 axles, 6 tires)
6 Single-Unit Truck (3 or more axles)
7 Truck/Trailer(s) [single-unit truck with trailer]
8 Truck/Trailer (without trailer, bobtail or saddlemount)
9 Tractor/Semi-Trailer (one trailer)
10 Tractor/Double (two trailers)
11 Tractor/Triples (three trailers)
98 Other Truck > 10,000 lbs. (not listed above)

Cargo Body Type: Enter one code from below

- 0 Not Applicable/No Cargo Body
1 Bus (seats for 9-15 people, including driver)
2 Bus (seats for 16 people or more, including driver)
3 Van/Enclosed Box
4 Cargo Tank
5 Flatbed
6 Dump
7 Concrete Mixer
8 Auto Transporter
9 Garbage/Refuse
10 Grain, Chips, Gravel
11 Pole
12 Log
13 Intermodal Chassis
14 Vehicle Towing another Motor Vehicle
99 Other Cargo Body (not listed above)

GVWR/GCWR (use GCWR for truck combinations):

- 1 10,000 lbs. or less
2 10,001 - 26,000 lbs.
3 Greater than 26,000 lbs.

Bus Use:

- 0 Not a Bus
1 School (Public or Private)
2 Transit
3 Intercity
4 Charter
5 Other

Hazardous Materials Involvement:

- Did the vehicle have a Haz Mat Placard? YES NO
If YES, include the following information from the placard
A. HM 4-digit # or name from the diamond or box:
B. HM Class # from bottom of diamond:
Was HAZ Mat released from THIS vehicle's cargo? YES NO

MOTOR CARRIER INFORMATION: Check One

- Interstate Carrier
Intrastate Carrier
Not In Commerce Government
Not In Commerce-Other Trucks Over 10,000 lbs. GVWR/GCWR

Carrier Name:
Carrier Street Address (P.O. Box only if no street address):
City/State/Zip:
Carrier Identification Number(s): NONE: USDOT#: MC/MX#: State #:

SEQUENCE OF EVENTS

NOTE: For THIS vehicle, list up to four: Event 1 Event 2 Event 3 Event 4

Non-Collisions

- 1 Ran Off Road
2 Jack knife
3 Overturn (Rollover)
4 Downhill Runaway
5 Cargo Loss or Shift
6 Explosion or Fire
7 Separation of Units

Non-Collision (con't)

- 8 Cross Median/Centerline
9 Equipment Failure (tires/brakes/steering, etc)
10 Other Non-Collision

Collision Involving/With

- 12 Pedestrian
13 Motor Vehicle In-Transport
14 Parked Motor Vehicle

Collision Involving/With (con't)

- 15 Train
16 Pedal cycle
17 Animal
18 Fixed Object
19 Work Zone Maintenance Equipment
20 Other Moveable Object
98 Other: Describe

Signature of Officer: Dept/Div/Troop Badge # Date of Report Reviewed By: Photos Taken: YES NO By: