

Bulloch County Accident Report

County Driver Information

Name: _____

License #: _____

Date: _____ Time: _____ ^{AM}_{PM}

Location: _____

County Vehicle Passengers

Name: _____

Phone: _____

Name: _____

Phone: _____

County Vehicle Information

Year: _____ Make: _____

Model: _____

VIN: _____

Damage: _____

Other Vehicle Driver Information

Name: _____

Phone: _____

Address: _____

City: _____

State: _____ Zip: _____

Other Vehicle Passengers

Name: _____

Phone: _____

Name: _____

Phone: _____

Other Vehicle Information

Year: _____ Make: _____

Model: _____

Tag: _____ State: _____

Damage: _____

Other Vehicle Owner Information

☐ Same as Driver

Name: _____

Phone: _____

Address: _____

City: _____

State: _____ Zip: _____

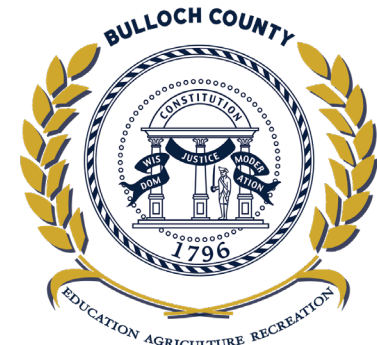
Insurance Carrier: _____

Policy #: _____

Accident Reported To:

☐ BCSO ☐ SPD ☐ GSP ☐ Other: _____

Report #: _____



Add additional information on back if needed.

This form to be completed by the County Vehicle driver



Bulloch County Board of Commissioners Auto Accident Statement

Name: _____ Employee ID: _____

☐ Driver ☐ Front Passenger ☐ Left Rear ☐ Right Rear ☐ Center Rear ☐ Exterior ☐ Other _____

Date of Accident: _____ Time: _____ ☐ AM ☐ PM

Location of Accident: _____

Conditions (*Weather, Lighting, Traffic, etc*): _____

What actions or events led up to the moment of accident? _____

Describe the accident (*What happened?*): _____

Additional facts/narrative (*Use other side if needed*): _____

Sign

Date

*To be completed by all County Vehicle occupants or employee witnesses



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☐ Driver ☐ Front Passenger ☐ Left Rear ☐ Right Rear ☐ Center Rear ☐ Exterior ☐ Other _____

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Sign

Date

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Reporting to Law

Enforcement

Call 911 if:

- There are injuries **OR**
- A vehicle is on fire **OR**
- Hazardous materials spill other than vehicle fluids **OR**
- Fuel is leaking **OR**
- Vehicles cannot be moved **OR**
- You are not sure which to call

Call non-emergency (912-764-8888) if:

- There are no injuries **AND**
- There is only minor damage

Be prepared to give the dispatcher the following information:

1. Your Name
2. Location of Accident
3. Description of Vehicles
4. Number and Severity of Injuries



Accident Report Packet

County Contacts

Bulloch County Risk Management
912-259-9707

Bulloch County Sheriff's Office
912-764-8888

ACCG Claims Administration (Insurer)
1-877-421-6298



Insurance Info

ACCG-INTERLOCAL RISK MANAGEMENT

AGENCY VEHICLE INSURANCE
IDENTIFICATION CARD

Named Member: Bulloch County
Policy Number: ACCG – IRMA 0750

Motor vehicles owned by a political subdivision of Georgia are not subject to the Motor Vehicle Safety Responsibility Act in accordance with OCGA 40-9-4 or to the Georgia Motor Vehicle Accident Reparation Act of 1974 as amended as per Georgia Attorney General opinion U74-114.

For your information, this motor vehicle is protected for property damage and liability claims through membership in the ACCG-Interlocal Risk Management Agency.

ACCG Claims Administration Services
Association County Commissioners of Georgia
191 Peachtree St NE, Suite 700
Atlanta, GA 30303
(404)614-2553 or 1-877-421-6298 or
FAX 1-888-221-4079

*This card may be given to the other driver

Photo Tips

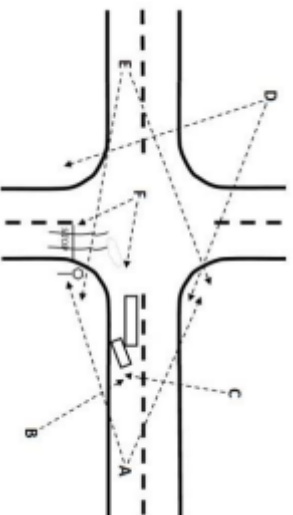
For all Involved Vehicles

- Photograph license plates and VINs
- Include the whole vehicle to show where the damage is
- Take closeups of damage

For the Accident Scene

- Take photos before vehicles are moved, if possible
- Step back far enough to take in the entire scene
- Take photos from different angles
- Include traffic signals and markers, tire tracks, debris, etc.
- The diagram below shows a good accident photography technique

Remember: Only take photographs if it is safe to do so!



- A. Overall view of scene
- B. Overall view of scene
- C. View of intersection showing traffic controls
- D. View of intersection showing traffic controls
- E. View along path of travel including traffic controls and visibility
- F. Mid-range photos of skid marks, debris, etc.

Accident Checklist

- ☐ **STOP!** – Do Not leave the scene
- ☐ **Aid the Injured**
 - Do Not move them unless they are in immediate danger (fire, fuel leak, etc.)
- ☐ **Notify Law Enforcement**
 - Injuries or disabled vehicle? Call 911
 - No injuries, vehicles operable? Call the non-emergency line: 912-764-8888
- ☐ **Call Your Supervisor**
- ☐ **Take Pictures** if it is safe to do so
 - Before moving vehicles, if possible
 - See Photo Tips card in this packet
- ☐ **Move Vehicles** off road when safe to do so
- ☐ **Follow Directions** from police, fire, EMS
- ☐ **Don't Comment** on who you think is at fault
- ☐ Get the **Police Report Number** and **exchange contact information** with the other driver
- ☐ Complete the forms in this packet **before ending shift** and turn in to your supervisor