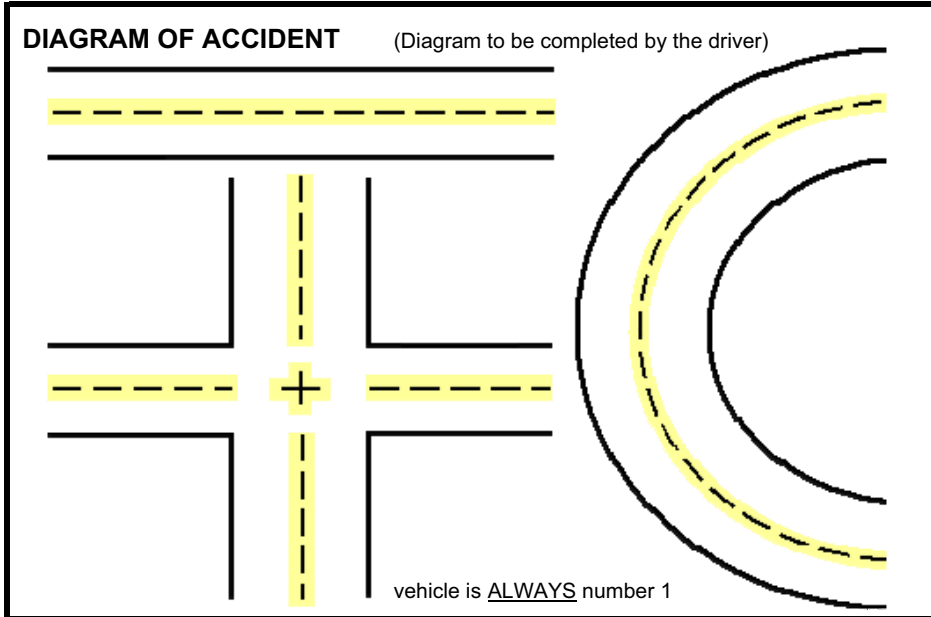




# OPERATOR'S REPORT OF ACCIDENT

Route #: \_\_\_\_\_ # of Passengers: \_\_\_\_\_ Please ensure a passenger name list is attached to this report.



**WEATHER CONDITIONS** (check)

1. No adverse conditions  
 2. Rain       4. Fog  
 3. Snow       5. High Wind

NOTE: \_\_\_\_\_

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**ROAD CONDITIONS** (check)

1. Dry       4. Ice  
 2. Wet       5. Dirt  
 3. Snow       6. Sand

NOTE: \_\_\_\_\_

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**LIGHT CONDITIONS** (check)

1. Daylight       4. Dark  
 2. Dawn       5. Dark-lighted  
 3. Dusk       6. Other

NOTE: \_\_\_\_\_

**EMPLOYEE / DRIVER DESCRIPTION OF ACCIDENT:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Employee / Driver Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Posted speed limit: \_\_\_\_\_ kph  
 Travelling speed: \_\_\_\_\_ kph  
 Vehicle lights on? \_\_\_\_\_

**ROAD CONTOUR** (check)

1. Straight Level       3. Curve Level  
 2. Straight Grade       4. Curve Grade

**OCCURRENCE** (check)

1. On Roadway       3. Off Right Side  
 2. Off Left Side       4. On Opposing Lane

**TWO VEHICLE COLLISION** (check)

1. Backing       4. Intersection  
 2. Rear End       5. Turning       Right       Left  
 3. Head On       6. Other: \_\_\_\_\_

**ONE VEHICLE COLLISION** (check)

1. Backing       4. Pedestrian  
 2. Hit Fixed Object       5. Other: \_\_\_\_\_  
 3. Parked Vehicle      \_\_\_\_\_

**ALLEGED EMPLOYEE / DRIVER ERROR** (check)

1. Turns       5. Rear ended other vehicle       9. Collision with stationary object  
 2. Intersections       6. Rear ended by another vehicle       10. Overhead objects  
 3. Sideswipe       7. Lane change       11. Miscellaneous \_\_\_\_\_  
 4. Backing       8. Pedestrian       12. Not Applicable

**RESULT OF OPERATOR INVESTIGATION / ACTION TAKEN**

SCHOOL NOTIFIED       OSTA OFFICIALS NOTIFIED       OTHER: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Operator Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_