



**Triangle Transit Authority
Vanpool Accident Report Form**

In case of an accident in which you cannot proceed, please contact the following to assist you:

- ~ **Call the Triangle Transit Vanpool Manager at 919-622-9097 or Vanpool Maintenance at 919-622-9098.**

IMPORTANT – Please complete the following form at the scene of the accident and mail or fax to:

**Triangle Transit Authority
PO Box 13787
Research Triangle Park, NC 27709
FAX: 919-485-7458**

Name of Driver _____ **Driver's License #** _____ **Van No.** _____

Address of Driver _____ **Phone #** _____

_____ **am/pm**
Time of Day _____ **Date** _____

Van VIN Number _____

Name of other Driver Involved _____ **Driver's License** _____ **Phone #** _____

Address of Other Involved Driver _____

Insurance Company _____ **Policy Number** _____ **Phone #** _____

Description of the Accident. Please include street location, description of actions that led to accident, injuries sustained by persons in either vehicle and any damage to the van or other driver's car.

Name of Investigating Officer: _____

Officer's Jurisdiction: _____

Phone # _____

TTA vans are owned by:

Triangle Transit Authority
P.O. Box 13787
Research Triangle Park, NC 27709
(919) 485-RIDE (7433)

Insured by:

RLI Transportation
Policy Number: LFB0014461
Expiration Date: 7/1/2010

List all riders on van at the time of the accident:

<u>Name</u>	<u>Address</u>	<u>Work Number</u>