

Incident Information Form☐**Incident**☐**Accident**☐**Collision**☐**Other**

Driver: _____

Date: _____

License #: _____

Date of Incident: _____

Unit # _____ Time of Incident: _____ AM/PM

Phone #: _____

Location of Incident: _____

Town: _____ **OR** On Rural Road: _____School Bus Use at Time of Incident: ☐ Regular Route ☐ Special Event ☐ Maintenance/Fueling ☐ Other

If Other, Please Specify: _____

Posted Speed Limit: _____ KM/H Driver's Speed: _____ KM/H ☐ Not Applicable ☐ Stopped

Incident Involved School Bus and: _____

Weather Conditions/Visibility: _____ Road Surface Condition: _____

YES NO Was driver wearing seatbelt?

YES NO Were there passengers on the bus? If so how many Adults: _____ Children: _____

YES NO Were there any injuries? If so was emergency services called? YES NO

YES NO Were police notified? If so, was report completed? YES NO

YES NO Was strobe light activated at time of incident?

YES NO Did a "Don't Pass" law violation occur?

YES NO Did incident occur when loading or unloading?

YES NO Did incident occur at an intersection?

YES NO Was another vehicle involved? If so, what kind of Vehicle? _____

*If another vehicle was involved get the name of the driver, license number, license plate and phone number.**If any reports were filled out with RCMP or Emergency Services etc., include them with this form.*

Summary of incident including a list of injuries and damages to other vehicles or property.

Vehicle Operator Signature: _____ Date Signed: _____

Supervisor of Transportation: _____