

VEHICLE ACCIDENT REPORT

(TO BE COMPLETED BY SUPERVISOR & EMPLOYEE)
OKLAOMA COUNTY
ENVIRONMENTAL HEALTH & SAFETY DIVISION

REPORT PREPARED BY: _____ PHONE: _____ DATE REPORTED _____

DEPARTMENT NAME _____ DATE OF ACCIDENT _____ TIME OF ACCIDENT _____

NAME OF EMPLOYEE _____ S.S. # _____

IN YOUR OWN WORDS, EXPLAIN WHAT HAPPENED _____

WHAT DO YOU BELIEVE CAUSED THE ACCIDENT _____

SUBMIT ORIGINAL TO ENVIRONMENTAL HEALTH & SAFETY DIVISION
 ALL QUESTIONS MUST BE ANSWERED, LEAVE NO BLANKS

AGE OF EMPLOYEE YEARS	LENGTH OF EMPLOYMENT MONTHS YEARS	AVERAGE WEEKLY WAGE _____
DAY OF WEEK _____ 01 SUNDAY 05 THURSDAY 02 MONDAY 06 FRIDAY 03 TUESDAY 07 SATURDAY 04 WEDNESDAY 08 SUNDAY	LOCATION _____ 01 MAINT SHOP 02 COUNTY BUILDING 03 COUNTY BARN 04 COUNTY ROADS 05 PRIVATE PROPERTY 06 OTHER	LIGHT _____ 01 DAYLIGHT 02 DAWN/DUSK 03 DARK-NO LIGHT 04 DARK ARTIFICIAL LIGHT 05 NOT APPLICABLE UNKNOWN
TIME OF DAY _____ 01 6-9 AM 02 9-12 NOON 03 12-3 PM 04 3-6 PM 05 6-9 PM 06 9-12 MIDNIGHT 07 12-3 AM 08 3-6 AM 09 UNKNOWN	WEATHER _____ 01 CLEAR 02 RAINING 03 SNOWING 04 SLEET 05 FOG/SMOG 06 OTHER 07 NOT APPLICABLE-UNKNOWN	VEHICLE TYPE _____ 301 PICKUP TRUCK, JEEP 302 TRUCKS OTHER THAN PICKUP 303 TRACTORS (TRACK) 304 TRACTORS (WHEEL) 305 GRADERS, SCRAPPERS, DRAGS 315 CRANE 320 ROLLER 323 BULLDOZER 003 TANKERS (FUEL) 612 AUTOMOBILE 001 OTHER
DEPARTMENT _____ 0400 SHERIFF 0600 TREASURER 0800 COUNTY COMMISSIONER 0900 OSU EXTENSION 1000 COUNTY CLERK 1400 COURT CLERK 1600 ASSESSOR 2200 ELECTION BOARD	2300 ENV HLTH & SFTY/HR 2400 PURCHASING 2500 MIS 2700 TRN & GEN ASST 3100 ENGINEERING 3400 EMERGENCY MANAGEMENT 4100 PLANNING COMMISSION 4200 FACILITIES MANAGEMENT 6000 JUVENILE	6200 CBR/COURT SERVICES 6300 COMMUNITY SENTENCING 8010 DISTRICT #1 8020 DISTRICT #2 8030 DISTRICT #3 0113 METRO PARKING 9999 NO EMPLOYEE INVOLVED OR UNKNOWN 0000 OTHER
ACCIDENT TYPE _____ 01 HEAD-ON 02 TURNING ACCIDENT 03 SIDESWIPE 04 REAR-END-COUNTY HIT OTHER 05 REAR-END-OTHER HIT COUNTY 06 HIT OVERHEAD OBJECT 07 HIT STATIONARY OBJECT/ENCLOSURE	08 HIT PARKED VEHICLE 09 BACKING-HIT OBJECT/VEHICLE 10 RIGHT ANGLE (INTERSECTION) 11 TOWING/PUSHING 12 OBJECT FELL/FLEW FROM TRUCK 13 HIT PEDESTRAIN	14 CHEMICAL MATERIAL SPILL 15 RAN OFF ROAD 16 JACK KNIFE 17 OVERTURN 18 VEHICLE COLLISION 19 OTHER

ACCIDENT CAUSED BY COUNTY VEHICLE

01 FOLLOWING TOO CLOSE 02 FAILURE TO SIGNAL INTENTIONS 03 SPEED TOO FAST FOR CONDITIONS 04 DISREGARD TRAFFIC SIGN/SIGNAL 05 IMPROPER PASSING 06 IMPROPER TURNING	07 IMPROPER BACKING 08 IMPROPER LANE USAGE 09 IMPROPER PARKING 10 LIFT FORKS/LID, RAILS/BOX UP 11 MISJUDGED CLEARANCE 12 FAILURE TO SECURE LOAD	13 UNSAFE LOADING OR UNLOADING 14 MECHANICAL PROBLEM 15 TIRE BLOWOUT 16 NO UNSAFE ACT 17 OTHER
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INDICATE ON THIS DRAWING WHAT HAPPENED