

REPORT ALL INCIDENTS AND ACCIDENTS PROMPTLY TO:

Bruce Stuart	CVRTC President	603-986-9824
Jesse Mazzie	CVRTC Vice President	978-223-7364
David Kotsonis	Safety Committee Chair	603-828-7133

Or a Safety Committee Member below:

Bill Catanesye	207-608-9776
Leroy Tripp	603-866-2718
Dennis Heffernan	781-929-9484
Jesse Mazzie	978-223-7364

Involved in an accident/incident?

- 1 Check to make sure that everyone is OK and that the scene has been secured to prevent any additional property damage or injury.
- 2 Dial 911 if Police/Fire/EMS are needed
- 3 Incidents involving a motor vehicle or OHRV MUST require Police to respond.
- 4 If possible, fill out the field accident-incident report and witness card forms that are in your safety packets.
- 5 After an accident/incident, contact one of the club officers listed above ASAP.

FIELD ACCIDENT - INCIDENT REPORT

Your Name _____

Telephone Work _____ Home/Mobile _____

WHEN DID IT HAPPEN

Date _____ Day of Week _____ Time _____ AM/PM

WHERE DID IT HAPPEN

Location Name _____ Milepost/Address _____

Motor Car/Equipment or Vehicles Involved _____

WHAT HAPPENED AND HOW? (Keep Brief)

TO WHOSE PERSON OR PROPERTY

Full name of injured or owner _____

Injured/Owner's Home Address _____

Injured/Owner's Home Telephone _____

Extent of Injury or Damage (if known) _____

Approximate Cost or Value (If known) _____

Hospital or Place Taken _____

Sign _____ Print Name _____ Date _____

***** FILL OUT WITNESS CARD FORM *****
ON NEXT PAGE

WITNESS CARD

TIME _____ DATE _____

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TEL _____

Home

Work

Cell

E-Mail Address: _____

WITNESS CARD

TIME _____ DATE _____

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TEL _____

Home

Work

Cell

E-Mail Address: _____

WITNESS CARD

TIME _____ DATE _____

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TEL _____

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