



Procedures for Vehicular Accidents

I. Explanation of an accident / occurrence

1. Use or operation of a motor vehicle which results in bodily injury and/or property damage.
2. Damage to vehicle caused by fire or lightning; theft or larceny; windstorm, hail, earthquake, or explosion; malicious mischief or vandalism; flood or rising waters; breakage of glass; fire; theft; hail, collision with an animal or collision of a covered auto with another object.
3. Any occurrence which leaves a “mark” on a district vehicle.

Accidents are to be reported on the Aldine ISD Vehicle Accident Report. Complete and submit the attached report to the department leader.

II. What to do in case of an accident:

1. Safety First

Turn off the engine; activate emergency hazards.

Stay calm.

2. Get Help

A. Check for injuries.

B. **Call 911.**

Request Police and, if needed, ask for an ambulance.

C. Notify your Department Head.

Provide:

1. Your name
2. Vehicle and route numbers, if applicable
3. Location of collision
4. Injuries
 - a. EMT required for injuries? Yes / No
5. Fire or fuel spill / presence of smoke
 - a. Fire department required? Yes / No

The department head should go to the scene of the accident.

3. Protect the scene of the accident.
Ask all parties to remain at the scene until the police arrive.
4. Passengers to remain in vehicle, if safe to do so.
Do not allow passengers to leave the vehicle until authorities arrive unless remaining in the vehicle would pose a health and/or life and death hazard.
If evacuation is necessary, select a safe location, away from the vehicle, for passengers to wait.
5. Exchange information
Complete the information required on Aldine ISD Vehicle Accident Report.
6. Take pictures, if it is safe to do so:
 - Other motorist's driver's license
 - Other driver's insurance card
 - License plates
 - Damage to both vehicles, pictures from different angles
 - Accident scene, pictures from different angles
7. Limit discussion of the accident.
Do not discuss the accident with anyone except law enforcement officials or school district authorities. When telling the officer or school district authorities what happened, be certain to give an accurate account. It is okay if you do not know some of the facts. Do not speculate or guess.
8. Do not admit fault.
Do not apologize. Do not sign any documents unless it is for the police.
The determination of fault is to be made by the insurance companies.

III. Department leaders, or their designee, are to report accidents to the district's insurance company.

All accidents, and other physical damage to vehicles (natural causes: flood, hail, wind, and material etc.), should be reported online:

Insurance Company:	Texas Association of School Boards (TASB)
Link to online claim:	TASB Online Auto Claim
Telephone:	1-800-580-8272

The Insurance Adjuster will contact the department head to resolve the claim.
Department leaders have discretion to choose a repair shop and/or mechanic.

IV. "Insurance and Accident Information" envelopes should be in the glove compartment of district vehicles. The envelope should contain:

- A. Procedures for Vehicular Accidents
- B. Vehicle Accident Report
- C. District's automobile insurance card
- D. Pencil



Aldine I.S.D. Vehicle Accident Report
(Submit this report and pictures, if any, to your Department Head)

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I. Aldine ISD Driver and Accident Information

Date of Accident _____ Time of Accident _____ A.M. P.M.
Name of AISD Driver _____ Last 5 of Aldine ID _____
Driver's License # _____ Cell Phone _____
Work Location _____
District Vehicle # _____ License Plate # _____
Make of Vehicle _____ Model _____ Year _____
Location of Accident _____

II. Other Driver, Insurance and Vehicle Information

Name of Other Driver _____
Owner of the Vehicle _____
Date of Birth _____ Driver's License # _____
Driver's Address _____
Cell Phone _____ Business Name & Phone _____
Insurance Company _____ Policy # _____
Agent's Name and Phone _____
License Plate _____ Make of Vehicle _____
Model of Vehicle _____ Year _____ Color _____

III. Police Information

Did the police investigate the accident? Yes ____ No ____ Which Police Agency? _____
Officer's Name _____ Badge _____
Traffic Citation issued? Yes ____ No ____ For what reason? _____

IV. Injury Information (write additional injuries on back)

Injured Person's Name _____
Address _____ Phone _____
Injured Person's Name _____
Address _____ Phone _____

V. Witness Information (write additional witnesses on back)

Witness's Name _____
Address _____ Phone _____
Witness's Name _____
Address _____ Phone _____

****Continued on back****



VI. Describe How The Accident Occurred

**** Draw the Accident Scene Here ****

VII. Additional Information
