## 400-139 Driver Statement

R O U T I N G	LAGUNA WOODS VILLAGE SECURITY DIVISION			CASE#								PAGE 1 Of 1		
				INCIDENT REPORTED										
	REAL ESTATE SIGN(S) REPORT  400-611 (REV. 12-21-2015 rs)  0 PHOTOS			DATE			DAY OF WEEK WED		ΞK	sdf	TIME □AM □PM			
				S	CODE #									
☐ VEHICLE DAMAGE REPORT ☐ NON-INJURY REP						☐INJURY REPORT								
DRIVER NAME AND EMPLOYEE #						DRIVER ADDRESS								
DRIVER LICENSE NUMBER						CLASS D/L A B C RESTRICTIONS								
MAKE/MODEL/YEAR VEHICLE YOU WERE DRIVING  VEHICLE PO #								WORK CENTER #						
TIME OF INCIDENT						DATE OF INCIDENT								
LOCATION OF INCIDENT						WHO WAS NOTIFIED IN OFFICE(SUPERVISOR)								
WHEN WAS SECURITY NOTIFIED?						REPORTING OFFICER								
DATE TIME														
WAS AN	YONE HURT? YES													
NAME(S) ADDRESS							PHONE							
IF YES, EXPLAIN IN DETAIL														
WHERE PARAMEDICS CALLED :						WAS ASSISTANCE WAS GIVEN TO INJURED :								
WHO PROVIDED ASSISTANCE :						DID INJURED REMAIN AT THE SCENE :								
WAS INJURED TRANSPORTED VIA AMBULANCE :						RELEASE TO: OT				OTHER	:			
NAME OF WITNESSES : ADDRES						•				PHONE NUMBER :				

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VEHICLE USE AT TIME OF INCIDENT/HOW FAR AWAY WAS OTHER VEHICLE WHEN NOTICED

IF FAULTY CONDITION OF EITHER VEHICLE CAUSED INCIDENT, EXPLAIN:

COMPLETE DIAGRAM INDICATING STREET & DIRECTIONS & COURSE OF EACH VEHICLE ALSO POSITONS AT TIME OF IMPACT :

PLEASE DESCRIBE INCIDENT IN DETAIL, STATING WHAT YOU KNOW ABOUT THE INCIDENT, COMMENT UPON ANY STATEMENTS MADE BY YOURSELF OR OTHERS AT THE SCENE OF THE INCIDENT. IF UNSURE HOW DAMAGE OCCURRED STATE WHAT YOU KNOW ABOUT THE DAMAGE, INCLUDING POSSIBLE CAUSE, INCLUDE THE FOLLOWING DETAILS (FOR ALL VEHICLES), SPEED, LOCATION, DIRECTION, DESCRIBE CONDITION OF WEATHER, ROAD TRAFFIC CONDITIONS AND VISIBILITY.