UCR AUTO INCIDENT – TELEPHONIC REPORTING

Effective January 1, 2009

DRIVER REPORTING REQUIREMENTS:

Each vehicle has a Driver Incident Report Form # RM 10/2008 to collect and document at the scene all necessary information and details of the incident. Drivers are required to report **ALL** auto incidents within 24 hours direct to UCR's Claims Administrator, Sedgwick by calling 1-800-416-4029 and Press 1" Operators are available 24/7.

DRIVER CALL-IN INSTRUCTIONS:

Identify yourself to the operator as an employee or student of UCR. Be prepared to answer the following questions for the operator: UCR Account Number: 20950008
Unit:_____   Sub Unit:_____

PERSONAL INFORMATION:

Driver's Name
Drivers License #
Home Phone
Work Phone
Department
Job Title

INCIDENT INFORMATION:

Date of Incident
Time of Incident
Location of Incident
No. of vehicles involved
Number of Injured parties
Police authority name
Police report #
Describe in detail the incident

UC VEHICLE INFORMATION:

UCR Vehicle #
Vehicle License #
Year/Make/Model
Damage description
Location of UC vehicle

UC PASSENGER INFORMATION:

Name
Address
Phone
UC affiliated [employee or student]
Describe injuries

OTHER VEHICLE INFORMATION

Year/Make/Model
Driver name, address, phone
Driver License #
Vehicle License #
Insurance company and policy number
Vehicle Damage description
Passenger injuries

WITNESS INFORMATION:

Name
Address
Phone
UC affiliated [employee or student]

ADDITIONAL INFORMATION:

Any pertinent information please provide