

MoDOT Transit Vehicle Accident Report

Report must be submitted within 5 days of the accident

Name of Agency: _____

Date of Accident: _____

Vehicle Information

Year: _____

Make: _____

Model: _____

Vehicle VIN #: _____

Insurance Company: _____

Insurance Claim #: _____

Police Report # (if applicable, if one is issued MoDOT needs a copy): _____

Type of Accident: One Vehicle Multiple Vehicle Act of Nature

Briefly describe accident below:

Authorized Signer: _____

Date: _____

This report is for federally funded active vehicles through MoDOT Transit.
Completed reports must be submitted to christy.evers@modot.mo.gov for review.