



UNIVERSITY CLAIM # _____

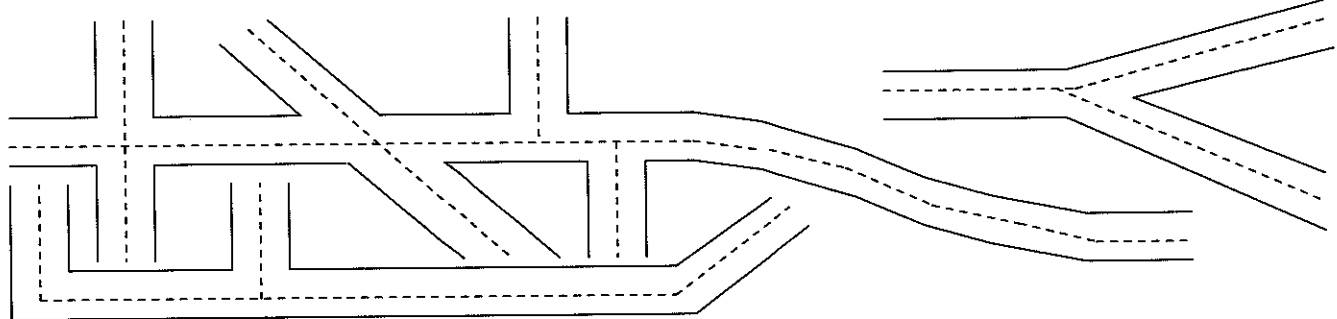
Arizona Department of Administration
RISK MANAGEMENT SECTION
AUTOMOBILE LOSS REPORT

STATE AGENCY	Department U of A 412	Division	Section	AFIS Mail Code	RMS NO. (for RMS use only)			
FACTS	ACCIDENT LOCATION Street Address							
	Intersecting Street of Highway No. and Mile Post No.				<input type="checkbox"/> Intersection <input type="checkbox"/> Non-Intersection			
	CITY		<input type="checkbox"/> Inside <input type="checkbox"/> Outside		County	Weather		
	DATE OF ACCIDENT	Day of Week	Hour	<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.	No. of Vehicles Involved	No. Persons Injured		
	MOTOR VEHICLE INVOLVED WITH 1. <input type="checkbox"/> Pedestrian 3. <input type="checkbox"/> Other State Vehicle 5. <input type="checkbox"/> Other _____ 2. <input type="checkbox"/> Other Motor Vehicle 4. <input type="checkbox"/> Fixed Object							
STATE VEHICLE	Year	Make	Model	License No.	State			
	UA Motor Pool Vehicle?	Vehicle No.	Removed To	Removed By				
	DRIVER	Last Name	First	M.I.	Point of Impact on Vehicle	Est. Cost Repair		
		Address			City, State Zip	Phone(s)		
		Job Classification	Department/Division/Section	Drivers License No.	<input type="checkbox"/> Operator <input type="checkbox"/> Chauffeur	Exp. Date	State	
OTHER VEHICLE <small>(More than 1 attach sheet)</small>	OTHER VEHICLE	Year	Make	Type	License No.	State	Vehicle No.	
	VEHICLE	Removed To	Removed By	Point of impact on Vehicle	Est. Cost Repair			
	DRIVER	OWNER	Last Name	First	M.I.	Address	City, State	Phone(s)
		DRIVER	Last Name	First	M.I.	Address	City, State	Phone(s)
		Insured By	Drivers License No.		Exp. Date	State		
PROPERTY DAMAGE	To Property Other Than Vehicles					Est. Cost Repair		
	Name and Address of Owner of Property							
INJURIES	Last Name	First	M.I.	Address		Phone(s)		
	Description of Injury							
	Last Name	First	M.I.	Address		Phone(s)		
	Description of Injury							

INJURIES	Last Name	First	M.I.	Address	Phone(s)
	Description of Injury:				
	Last Name	First	M.I.	Address	Phone(s)
	Description of Injury:				
WITNESSES	Name			Address	Phone
	Name			Address	Phone
POLICE REPORT	Agency	Officer and I.D. No.		Report No.	

IMPORTANT: DESCRIBE HOW ACCIDENT OCCURRED:

DRAW ROUGH DIAGRAM OF ACCIDENT: Show your car as ; other car as  as the collision occurred. Show direction and distance traveled before crash by solid line thus: _____ Then at point of crash; third, positions and distances traveled after collision. Show distance and direction traveled after crash by dotted line thus: - - - - -



I hereby certify that this is a true statement of the facts to the best of my knowledge and belief.

X _____ Date _____
Driver's Signature

(Driver's Name Print or Type)

- Phone
- In Person
- Mail

SUPERVISOR NAME (Print or Type) (INT) PHONE # DATE

MAIL COMPLETED FORM TO: Risk Management, PO Box 210300, Tucson, Arizona 85721-0300 or FAX 621-3706

Procedures in the Event of an Auto Accident

1. **Call 911 and arrange for police and medical assistance as needed.** It is recommended that police be called for all collisions, regardless of severity to obtain a third party evaluation of the incident.
2. **Render first aid to the extent you feel you can do so comfortably and in good faith.** While awaiting emergency response, try to make injured persons comfortable, but do not attempt to move them.
3. Provide all requested information to police officers at the scene.
4. **Do not admit liability or make any promise** or representation that any person's damages will be covered by the university. Similarly, do not accuse the other driver of fault, or engage in arguments about fault.
5. To the extent you can reasonably do so, obtain written names and contact information for all persons involved in the accident, including passengers and any potential witnesses.
6. Persons interested in making a damage claim should be referred to Risk Management and Safety for claims forms and information.
7. **Immediately notify Risk Management and Safety** and your supervisor about the accident to ensure all necessary information is obtained.
8. Complete an Automobile Loss Report and submit it to Risk Management and Safety as soon as possible. If U of A employees are injured in the accident, then a Supervisor's Report of Employee Injury must be completed for each employee.

Insurance Issues for Vehicle Property Claims

Insurance Issues for Vehicle Property Claims

Motorpool vehicles - The UA Motorpool arranges for all repairs to vehicles from their rental fleet, and coordinates all claims with RM&S. Renters are required to immediately report all damage to the Motorpool. Damage or repairs not covered by the State's insurance program will be charged to the renting department.

Departmental vehicles - Departments may make their own repair arrangements for damage to departmental vehicles. To be eligible for insurance reimbursement, a properly completed claim must be submitted to RM&S, and depending on dollar value, a state adjuster may want to inspect the vehicle before repairs are performed. Losses less than \$100 are not covered.

Commercial rental vehicles - If a rental car is damaged while in U of A use, the rental agency must make a liability claim against the State to obtain recovery of the damages. Always report damage immediately to the rental car agency, and refer them to RM&S for guidance and claim instructions. The U of A's Corporate Travel Card - currently Diners Club, provides automatic coverage for rental cars, provided their card is used to pay for the rental. Contact the Travel Office for more information about the Diners Club card.

Personal vehicles driven on U of A business - There is no State coverage for damage to personal vehicles. Vehicle owners are expected to have their own insurance, and the mileage reimbursement rate includes a cost factor for this expense. Liability incurred in a personal vehicle on U of A business is covered by the State, but only on an excess basis. Personal liability insurance must be exhausted to address claims before State coverage applies.

Insurance Issues for Vehicle Liability Claims

Employees and other authorized persons driving on U of A business are covered by the State for liability arising from their actions, in accordance with the Risk Management Statute A.R.S. §41-621 et seq. Legal defense of claims against the U of A is provided by the Office of the Arizona Attorney General, Liability Management Section. Persons who believe they have incurred damages in the form of property damage or bodily injury as the result of university vehicle use must make their claim against the State of Arizona, in accordance with the requirements of A.R.S. §12-821.01. University officials may not settle liability claims, and may not offer any promise or representation concerning the validity of a claim. Persons wishing to make a liability claim may obtain a form from RM&S titled "Notice of Claim Against the State of Arizona". This form is not available online, and must be submitted directly to the state as indicated in the instructions.

Special Note Concerning Commercial Rentals

State insurance covers losses arising from official university use of commercial rental vehicles. Since coverage exists, renters are advised not purchase the collision damage waiver insurance offered by car rental agencies. However, losses associated with personal use are not covered by the State, and are the responsibility of the renter. University travelers who combine business and personal use of a vehicle may wish to purchase rental car insurance at their own expense to avoid financial difficulties in the event of a loss. Use of the U of A Diners Club Corporate Travel Card to pay for car rental provides automatic loss coverage, for business and personal use.

**PLEASE PRINT THIS PAGE AND PLACE IN YOUR UA VEHICLE
UPDATED MAY 2006**

Evidence of Financial Responsibility

Arizona law requires the vehicle owners to carry proof of insurance in their vehicle as evidence of financial responsibility. Government plated vehicles, including university owned vehicles are exempt from this requirement. This exemption is set forth in Arizona Revised Statutes §28-4003, which states the following:

*This chapter does not apply to a motor vehicle that is either: 1. Owned by the United States, **this state** or a political subdivision of this state.*

Some police officers may not be aware of this exemption for government vehicles, and request a driver to present evidence of financial responsibility (insurance) anyway. To avoid problems on the road, this document may be presented to describe how university vehicles are insured.

The University of Arizona is an entity of the State of Arizona, and is insured against loss under a program of self-insurance administered by the Arizona Department of Administration Risk Management Section. This insurance program, as authorized by Arizona Revised Statutes §41-621, provides liability insurance coverage for university vehicles and their drivers while operated within the course and scope of employment and/or authorization.

Evidence of Registration

University of Arizona vehicles are registered with the State of Arizona and are issued government license plates, which document state ownership. In addition to the government plate, university vehicles have official markings including "The State of Arizona for Official Use Only." Registration of government vehicles does not expire as described in Arizona Revised Statutes §28-2511. For this reason, registration and title documents for university vehicles do not indicate an expiration date, and license plates are not marked with the month or year of expiration.

Questions about these provisions may be directed to the UA Department of Risk Management and Safety at (520) 621-1790.

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