

Accident or Vehicle Damage Report

Carolina Honduras Health Foundation

Immediately after an accident or any physical damage to a CHHF vehicle, fill out this form. Give it to Sandy Palencia or David Kelly and send one copy to Chris Zawacki on the day of return to the States. If making a copy is not possible, send Chris and email with this information. CZawacki@aol.com

CHHF Vehicle: Check one Toyota 16 passenger van _____
 Nissan 11 passenger van _____
 Ford F 250 Truck _____
 Utility Trailer _____

Name of Driver: _____

Team Leader Name: _____

Driver home phone number: _____

Driver's license number: _____

State in which license issued: _____

Date of accident or vehicle damage: _____

Accident location: _____

Police office location and report number: _____

For what purpose was vehicle being used? _____

Occupants of vehicle at time of accident:

Name, address, and phone number for all injured: (Use back if necessary.)

Describe damage to CHHF vehicle.

Describe damage to other vehicle(s).

Draw a diagram of accident if other vehicles involved. Use back of this sheet.

Take a digital photo of the damage to all vehicles involved in the accident. Send this photo electronically to Sandy Palencia cruzadas.sandy@gmail.com and to CZawacki@att.net