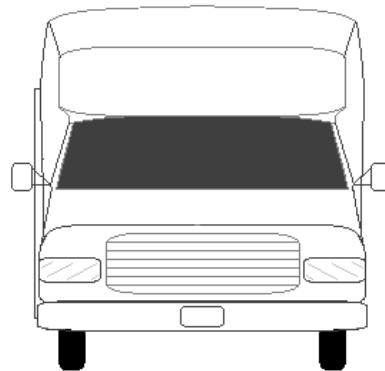
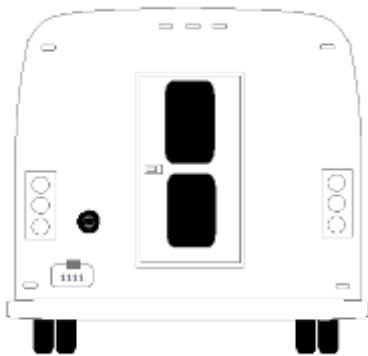
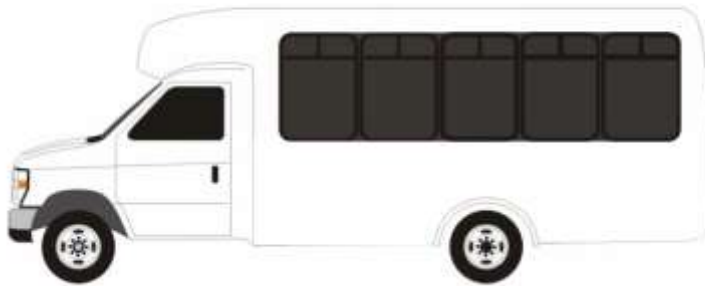
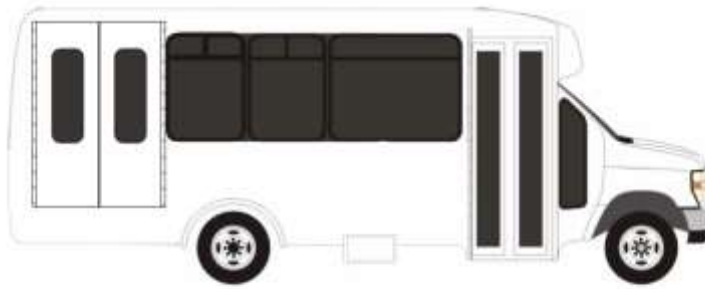


KDOT PUBLIC TRANSPORTATION  
VEHICLE DAMAGE REPORT FORM

Vehicle VIN: \_\_\_\_\_ Odometer: \_\_\_\_\_ Driver Name: \_\_\_\_\_

Date: \_\_\_\_\_ Agency: \_\_\_\_\_ Point of Contact: \_\_\_\_\_

Any damage to the vehicle should be noted on the illustrations below. Circle the area that has damage and note what the damage is and how the damage occurred.



Explanation of Damage: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Use additional pages as necessary.

Explanation of Incident: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Use additional pages as necessary.

Was a police report filed?:  Yes  No If so, police reporting number: \_\_\_\_\_

Has the FTA post-accident form been completed?:  Yes  No

Was anyone injured?:  Yes  No If so, who?: \_\_\_\_\_

Were there any passengers on board at the time of accident?:  Yes  No If so, how many?: \_\_\_\_\_

Was a drug screening performed?:  Yes  No Did the driver pass the drug screening?:  Yes  No  
Please do NOT send drug results to KDOT unless requested. Information contains PPI (Personal Identifying Information) that should be kept in the employee's file in a locked cabinet. KDOT, FTA, or other government agencies may reserve the right to access these if the situation escalates at a later date.

Was the Vehicle Totaled:  Yes  No

Cost of Repair / Totaled Amount: \_\_\_\_\_

**NTD Reportable Incidents:**

A safety or security event occurring on transit right-of-way or infrastructure, at a transit revenue facility, at a transit maintenance facility or rail yard, during a transit related maintenance activity or involving a transit revenue vehicle that results in one or more of the following conditions (please check any that apply):

- A fatality confirmed within 30 days of the event
- An injury requiring immediate medical attention away from the scene for one or more person
- Property damage equal to or exceeding \$25,000
- Collisions involving transit revenue vehicles that require towing away from the scene for a transit roadway vehicle or other non-transit roadway vehicle
- An evacuation for life safety reasons

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

By Signing this form, you are attesting that the information above and on page 1 is complete and accurate to the best of your knowledge. If any new information comes to light, you are agreeing to immediately contact the KDOT Public Transit Team at [KDOTtransit@ks.gov](mailto:KDOTtransit@ks.gov) with the new information.