

Vehicle Accident Report Sheet - Construction Site

1. Date and Time

Date of Accident

Time of Accident

2. Location

Exact Location of Accident

3. Details of Vehicle(s) Involved

Vehicle 1 - Type/Model

Registration Number

Driver's Name

Vehicle 2 - Type/Model

Registration Number

Driver's Name

4. Persons Injured

Name(s), type of injury, immediate actions taken

5. Description of Accident

Briefly describe what happened

6. Witness(es)

Name(s), Contact Details

7. Sketch of Accident Scene (if possible)

(Draw or describe the arrangement and positions of vehicles, equipment, roads, signs, etc.)

8. Reported By

Name

Designation

Date