

SECTION C: VEHICLE 2 DETAILS

Type of vehicle involved...

- State vehicle
 3rd party vehicle

Registration no.

Type of vehicle

Site on impact

Estimate of damage

Propose of journey
(If State vehicle)

Driver name

Injury

Qualification
(If State vehicle)

Name of vehicle owner
(If different to driver)

SECTION C: VEHICLE 3 DETAILS

Type of vehicle involved...

- State vehicle
 3rd party vehicle

Registration no.

Type of vehicle

Site on impact

Estimate of damage

Propose of journey
(If State vehicle)

Driver name

Injury

Qualification
(If State vehicle)

Name of vehicle owner
(If different to driver)

SECTION D: PASSENGER DETAILS VEHICLE 2

Name

Injury

Name

Injury

Name

Injury

Additional passenger information... *(If any)*

SECTION D: PASSENGER DETAILS VEHICLE 3

Name

Injury

Name

Injury

Name

Injury

Additional passenger information... *(If any)*

SECTION E: PEDESTRIAN DETAILS

Name _____

Injury

Other pedestrian involved details... (If any)

SECTION G: PROPERTY DAMAGE (NON VEHICLE)

Name of property owner _____

Type of property

Estimated damage

Other property damage details... (If any)

SECTION F: SKETCH CRASH/COLLISION

SECTION H: REPORTED BY: Person who discovers the incident and unless otherwise stated within the organisation, this person is responsible for completing the NIRF.

First name _____

Surname _____

Date notified

Category of person

Local system reference no.

SECTION I: IMMEDIATE ACTION TAKEN

SECTION J: OPEN DISCLOSURE DETAILS

Was open disclosure required?

Yes No

Date of open disclosure

Time of open disclosure Use 24 hour clock

Any additional open disclosure details: _____
