Accidents

- Stay at the scene in a safe place to gather information.
- Contact JHU Parking IMMEDIATELY 410-516-7275
- Contact JHU Security if near campus 410-516-4600
- Contact the police (911) if:
  - There are injuries
  - Any vehicle involved is severely damaged
  - You feel unsafe
  - You strike an unoccupied vehicle
- Exchange information (see "Information to gather following a loss" below).
- Do not admit fault.
- Information to gather following a loss:
  - PHOTOS
    - Damage (vehicles and/or property)
    - Accident scene (road conditions/skid marks/debris in roadway/vehicle positions)
    - Accident scene location identifiers (intersection/address/exit number)
    - Identification (clear photos of insurance cards, license plates, etc.)
    - Email all photos to vans@jhu.edu
  - DOCUMENT
    - Names, phone numbers, addresses and e-mail addresses of all occupants, including the number of occupants in the other car(s)
    - Names, phone numbers, addresses and e-mail addresses of all potential witnesses
    - Location (intersection/address/exit number)
    - Company name, policy number and phone number for other insurance companies
    - If emergency services respond: police department, police report number, phone number, officer name, badge number, ambulance company, fire department
- You must notify Hop Van staff immediately of any accident. Email vans@jhu.edu
Johns Hopkins University – Hop Vans
Collision Report Form

I. Preliminary Collision Information
Collision Date:___________________ Collision Time:__________________
Location: (include street, intersection, city, state):
____________________________________________________________________________________
____________________________________________________________________________________
Police notified? Y   N   If yes, report number:________________ Officer:_________________
Traffic citation issued? Y   N   If yes, attach copy to this report   Ambulance dispatched? Y   N
Weather condition (circle): Dry   Wet   Snow   Ice   Fog   Other:________________________

II. Hop Van Driver and Vehicle Information
Driver’s name:_____________________________ Telephone:_________________________________
Hop Van #:_________ Make/model/year:_______________________ VIN:_______________________
Vehicle drivable? Y   N   If no, who towed it? _________________________________________
Did airbags deploy? Y   N   Any injuries? Y   N   Any fatalities? Y   N
Describe vehicle damage:_______________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

III. Other Driver and Vehicle Information
Driver’s name:__________________________________ Telephone:____________________________
Driver’s license #:___________________________________ State:_____________________________
Address:_____________________________________________________________________________
Vehicle make/model/year:___________________________________ Color:______________________
VIN:_________________________________ Plate #:__________________________ State:__________
Is driver owner? Y   N   If no, owner’s name:_________________________________________
Owner’s address:_____________________________________________ Owner’s phone #:__________
Vehicle drivable? Y   N   If no, who towed it? _________________________________________
Did airbags deploy? Y   N   Any injuries? Y   N   Any fatalities? Y   N
Describe vehicle damage:_______________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

PLEASE PRINT CLEARLY
### IV. List any Injuries Reported at the Time of Collision

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<thead>
<tr>
<th>Name</th>
<th>Full Address</th>
<th>Telephone</th>
<th>Injury</th>
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### V. Passenger Lists

**Hop Van:**

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<tr>
<th>Name</th>
<th>Full Address</th>
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<th>Injury</th>
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**Other vehicle:**

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### VI. Witness List

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### VII. Other Notes – Please list any other property damage that happened as a result of the collision *(please take pictures)*, towing information, or other notes.

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

### VIII. Hop Van Driver’s Statement *(the driver is required to submit a signed statement)*

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Driver’s Signature: ___________________ Print name: ___________________ Date: __________
IX. Diagram

Please draw a picture of the intersection and approximate location and direction of travel of all vehicles involved just before the collision.

X. Other Information

Please attach any other relevant documentation and submit a copy to vans@jhu.edu and bring original to Parking Office at Homewood Campus ASAP.
REMEMBER

1. Do not admit fault or guilt
2. Do not criticize Hop Van equipment or rules
3. Never say you will contact the other party regarding damages or injuries. This is not your responsibility
4. Do not give out your phone number. You can give out the Parking Office phone number, which is 410-516-7275
5. As soon as possible, send a quick email with summary and photos to vans@jhu.edu

Important Phone Numbers (contact 911 immediately in case of accident involving injuries or severe damage)

JHU Security – 410-516-4600
JHU Parking Office – 410-516-7275
Hop Van Manager Office – 443-997-8156
Baltimore City PD non-emergency – 443-263-2220 option 2
Baltimore County PD non-emergency – 410-887-2222
Maryland State Police non-emergency – 410-780-2700