

Accident Procedure

This procedure shall apply to any incident resulting in property damage or injury to another involving any licensed City vehicle and all City equipment, whether owned, leased, or borrowed by the City of New Orleans or a personal vehicle of a City employee who receives auto allowance and who is on authorized City business at the time of the accident.

Step 1: Call 9-1-1 to request the dispatch of a police officer, and unless otherwise advised, remain at the scene of the accident. Make sure to obtain the accident report number given for the report written by the responding officer. If an NOPD officer is dispatched, this number will be the "NOPD Item Number."

Step 2: Report accident, damage or loss to the City's Risk Manager within twenty-four (24) hours. Contact information for the City's Third Party Administrator can be found on the Neutral Ground.

Step 3: All incidents and/or accidents, regardless of severity, that result in property damage, injury to employees or others, or damages to City vehicles must be reported to EMD. The appropriate contact information can be found on EMD's page of the City website- <http://nola.gov/equipment-maintenance-division/>.

Step 4: Complete a Vehicle and Equipment Damage Supervisor Report form. This form should be attached to your vehicle's copy of the Vehicle and Equipment Policy. If it is not, make sure to record:

- The accident report number/NOPD Item Number given for the report written by the police
- The: year, make, model, license plate #, odometer reading, and color of the other vehicles involved in the accident
- The names and addresses of the drivers of the other vehicles involved in the accident
- The names and addresses of the owners of the other vehicles involved in the accident
- The names and contact information of two (or as many as possible) witnesses to the accident
- A description of the damage done to the other vehicles involved in the accident
- The names of the occupants in the other vehicles involved in the accident
- The name, address, telephone number, and description of injuries of any injured occupants of other vehicles involved in the accident
- The name, address, and telephone number of the insurance carriers of the other vehicles involved in the accident, and the appropriate insurance policy numbers for the other vehicles involved in the accident

Step 5: Upon completion of Step 4, copies of the Vehicle and Equipment Damage Supervisor Report form are to be promptly sent to:

- The Risk Management Unit
- The Vehicle Coordinator of the employee's department.
- EMD

The employee should also keep a copy of the form for their own record

Step 6: The operator of the City vehicle must take a drug and alcohol test as soon as possible. Please visit EMD's page of the City website for the contact information of the vendor currently providing this service- <http://nola.gov/equipment-maintenance-division/>.

Step 7: Where death or injury has occurred from a vehicular accident, immediately notify the City's Risk Manager by telephone. Contact information for the City's Risk Manager can be found on the Neutral Ground page of the City website- <http://nola.gov/equipment-maintenance-division/>.

Step 8: All police vehicles require, in addition to the above, a Supervisory Report of Accident form to be completed by the employee's immediate supervisor. This form should be forwarded as present police department policy indicates.