**MOTOR VEHICLE SUPERVISOR’S COLLISION INVESTIGATION REPORT**

**DRIVER’S NAME....................................................**

**ASSIGNED LOCATION........................................ DATE OF LAST DRIVER TRAINING...............................**

**COLLISION OR INCIDENT DATE........................... TIME................... PLACE..............................................**

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**WHAT HAPPENED?**

Describe what took place 
Or what caused you to make this investigation.

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**WHY DID IT HAPPEN?**

Get all the facts by studying the job and situation involved. 
Question by use of WHY- WHAT- WHERE-WHEN-WHO-HOW

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**WHAT SHOULD BE DONE?**

Determine which of the 12 items Under EMP require additional attention.

<table>
<thead>
<tr>
<th>Equipment</th>
<th>Material</th>
<th>People</th>
</tr>
</thead>
<tbody>
<tr>
<td>Select</td>
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<tr>
<td>Arrange</td>
<td>Place</td>
<td>Place</td>
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<tr>
<td>Use</td>
<td>Handle</td>
<td>Train</td>
</tr>
<tr>
<td>Maintain</td>
<td>Process</td>
<td>Lead</td>
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</tbody>
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**WHAT HAVE YOU DONE THUS FAR?**

Take or recommend action, depending upon your authority. 
Follow up - was action effective?

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**HOW WILL THIS IMPROVE OPERATIONS?**

OBJECTIVE

Eliminate job hindrances

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<table>
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<tr>
<th>Investigated by</th>
<th>Date</th>
<th>Reviewed By</th>
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Preventable or Non-Preventable

Seat Belts Yes No
NOTE: This form is primarily a guide for the fleet supervisor to help with the investigation of collisions and related operating problems. Many of the responsible conditions that are identified will suggest ways and means to improve operations.

1. What Happened? Describe what took place. You may attach a completed collision report to satisfy this question.

2. Why Did It Happen? Question through the use of why, what, where, when, who and how questions.

3. What Should Be Done? Determine which of the 12 items under EMP require additional attention. Here are a few examples of conditions responsible for fleet operational problems.

   **Equipment**

   **Select** - Was the vehicle of the size, type and capacity required for the job? Are additional units, components, or accessories needed?

   **Arrange** - Can dispatching be improved to better deal with such factors as the availability of drivers, hours of service requirements, miles per trip, tight schedules, traffic conditions, weather, routing, and maintenance downtime?

   **Use** - Was the vehicle loaded and operated within its designed capacity and manufacturer's recommendations? Was the vehicle on a correct route for assigned work?

   **Maintain** - Were there mechanical defects or deficiencies present as the result of a lack of pre-trip inspections, poorly scheduled preventive maintenance service, or inadequate repairs?

   **Material**

   **Select** - Was the cargo acceptable to be hauled?

   **Place** - Was the cargo properly distributed, secured and protected?

   **Handle** - Was the cargo loaded, stowed and stripped-correctly?

   **Process** - Were the dock procedures adequate to avoid misloading, prevent damage to the cargo, and avert delays in departure?

   **People**

   **Select** - Did the employee meet the company's minimum job requirements? Recent MVR checked? License OK?

   **Place** - Was the employee qualified and physically fit for the assigned task?

   **Train** - Were there indications that further training is needed?

   **Lead** - Was the employee performing usual duties according to company policy and the supervisor's instructions at the time?

4. What Have You Done Thus Far? Take or recommend corrective action depending upon your authority and follow up to be sure that it was effective.

5. How Win This Improve Operations? Remember, the objective is to eliminate operational hindrances.

**DISCLAIMER**

The information provided in these materials is of a general nature, based on certain assumptions, and is intended as background material. The content of these materials may omit certain details and cannot be regarded as advice that would be applicable to all businesses. The background presented is not a substitute for a thorough loss control survey of your business operations. Readers seeking resolution of specific safety issues or business concerns regarding this topic should consult their professional safety consultant. We do not warrant that the implementation of any view or recommendation contained herein will result in the elimination of any unsafe conditions at your business locations or with respect to your business operations. Further, we do not warrant that the implementation of any view or recommendation will result in compliance with any health, fire, or safety standards or codes, or any local, state, or federal ordinance, regulation, statute or law (including, but not limited to, any nationally recognized life, building or fire safety code). We assume no responsibility for the control or correction of hazards, and the views and recommendations contained herein shall not constitute our undertaking, on your behalf or for the benefit of others, to determine or warrant that your business premises, locations, or operations are safe or healthful, or are in compliance with any law, rule or regulation.