

COMPETITOR/SERVICE CREW INCIDENT FORM

Property - Fence Damage / Vehicle Accident / Traffic Offence Notice

Following any incident all competitors, service crew or other members of your team must complete this form and hand it to the Competitor Relations Officer or Official in Charge at the next Regroup or Parc Fermé for transmission to the Clerk of the Course. Competitors and Service Crews please note that they should receive an acknowledgement from the Official to whom they hand this sheet.

NAME AND ADDRESS OF PERSON COMPLETING THIS FORM:

NAME: _____ CONTACT NUMBER FOR NEXT 24 HRS: _____

ADDRESS: _____

SIGNATURE: _____ DATE: _____

COMPETITOR SERVICE CREW TEAM MEMBER OTHER

PROPERTY-FENCE DAMAGE

PROPERTY-FENCE DAMAGE IS LOCATED: _____

_____ KMS FROM START OF SPECIAL STAGE NO _____ OR _____ KMS FROM START OF TC _____

BRIEF DESCRIPTION OF DAMAGE: _____

_____ VEHICLE REG NO _____

DATE: _____ TIME: _____ LEG NO _____ STAGE NO _____

VEHICLE ACCIDENT - (Name and initials of driver(s) or the vehicle(s) concerned)

NAME: _____ NAME: _____

ADDRESS: _____ ADDRESS: _____

VEHICLE REG No: _____ VEHICLE REG No: _____

NAME AND ADDRESS OF ANY INDEPENDENT WITNESS:

NAME: _____ ADDRESS: _____

DESCRIPTION OF INCIDENT: _____

WAS THERE ANY PERSONAL INJURY? YES/NO

TRAFFIC OFFENCE NOTICE - (Name and initials of driver(s) or the vehicle(s) concerned)

NAME: _____ ADDRESS: _____

VEHICLE REG No: _____

RECEIVED BY: _____ DESIGNATION: _____

TIME: _____ DATE: _____