

PROPERTY

GENERAL INFORMATION

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PROPERTY FORMS (APPENDIX)

- AD – 107 (Report of Transfer or Other Disposition)
- AD – 112 (Report of Unserviceable, Damaged, and Lost/Stolen Property)
- ARS – 45 (Vehicle Inspection List)
- SF – 91 (Accident Report Form)

PROPERTY

Mid South Area

Introduction

Federal Government classifies property as either “personal” property or “real” property. Real property is land, buildings, or structures, including any permanently attached fixtures and improvements. Personal property is property that is transportable, any property except real property. This includes equipment, furniture, vehicles, boats, and aircraft.

Department regulations (AGPMR 104.50.1) require agencies to establish responsibility for effective implementation of a property management program to:

- ensure maximum use of Department property,
- operate adequate inventory control and accountability systems, and
- properly dispose of unneeded agency assets.

The AAO administers the Area’s personal property management program according to REE policies and procedures. Appropriate PMO’s are:

- **Area Property Management Officers (APMO’s).** Serve as the AAO’s representative and liaison on personal property matters. The APMO provides management oversight for effective accountability, control, utilization, and disposal of personal property within their respective Area and locations. The APMO also provides guidance, training, and assistance to location PMO’s within their respective Area.
 - **Terry Krutz**
 - **Erica Jones**
- Location Administrative Officers (LAO’s) have primary responsibility for managing an effective property management program within their respective location to ensure accountability, control, utilization, and disposal of location property.

Accountable Property/ Accountable Officer (APO)

An inventory of accountable property must be maintained by each Accountable Property Officer.

The Accountable Property Officer is usually the Research Leader for your unit, however the responsibility can be delegated to a scientist in that unit.

Bi-annual accountable property checks are required, and all items not accounted for shall be reported on Form AD-112 by the APO.

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Accountable property is:

- property with an original cost of \$5,000 or more;
- all leased property regardless of cost; and
- all items determined sensitive by the agency.

Within Research Education Economics the following items are sensitive:

- firearms (all types); (*approval required before purchase*)
- law enforcement badges;
- property on loan to non-Federal recipients under the Federal Excess Personal Property Program (FEPP).

Non-Accountable Property

Although non-accountable property is not kept on an official inventory, managers are still responsible for maintaining internal control of all property assigned under their unit. They must provide adequate resources to their employees to secure property assigned to them. All employees are directly responsible for using Government property for official purposes and safeguarding property assigned to them.

A listing of non-accountable property with an acquisition cost between \$2500 and \$4,999 should be kept by the custodian. The listing should include a description of the item, serial no., cost and date of acquisition.

Tracking New Accountable Property

When you receive new accountable property, the Location Administrative Office will send you a bar code label along with a request for inventory information.

Attach the bar code to the property and fill out and return the inventory information.

It is very important that inventory information is returned within 14 days of receipt of property, so that the item can be added to inventory. You should inform the Location Administrative Office if there are extenuating circumstances that preclude you from providing the information within 14 days.

Attaching the Bar Code Label

1. Select an observable area on the property where a label can be easily seen. When possible, avoid areas which are vulnerable to spills from gasoline, oil, or other harsh liquids.
2. On equipment which has varying degrees of texture, place the label on the smoothest surface available to allow for the greatest amount of surface contact.
3. Outdoor equipment needs special attention. If it is maintained in sunlight, place the label where the least amount of direct sunlight hits daily.

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4. In cases where the label must be placed in an area which is not readily visible, you will need to make a notation in your records as to where the label was placed.
5. Allow the label sufficient time to adhere or “set up” by not placing any materials on the label for a 24-hour period.

Inventory information should include at least the following:

- description of the equipment
- serial no.
- manufacturer
- model no. (if available)

** If you receive new accountable property and do not get a bar code for the property, please notify your Location Administrative Officer or designated property person.

Acquiring Excess Property

Federal regulations (FPMR 101.26.1 and 101.43) state that excess property is the first source of filling acquisition requests. However, before acquiring excess property, it is the responsibility of the receiving party to inspect the item, the receiver will talk to the reporting agency official who has personal knowledge of the property.

<http://www.gsaccess.gov>

If you find something you want contact your LAO or location property personnel.

Defense Reutilization and Marketing Service (DRMS)

DRMS maintains inventory of all Department of Defense surplus property. The surplus property is managed by local Defense Reutilization and Marketing Offices (DRMO's) that are located at or near U.S. Military facilities.

<http://www.drms.dla.mil>

Field employees will work with their appropriate Property Management Officer to determine whether excess property is available within USDA through DEPPC, GSA, or DRMS. Property Management Officers will request excess on-line via Property System or FEDS/SCREEN.

In order to search and freeze excess property you must request a password with search and freeze authority. Contact your LAO or servicing property office.

When requesting excess that is accountable property, the Accountable Property Officer is responsible for forwarding receipt documentation to the Property Management Officer for updating to Property Management Information System/PROP.

Property

Reporting Excess Property

If you have property that is excess to your needs, please contact your Location Administrative Officer or location property personnel.

Report of Transfer or Other Disposition - Form AD-107 (Example Attached)

This form is used to document the transfer, loan, sale, trade-in, or donation of all personal property.

Transfer of Property - One research unit to another, from another Area, or Agency

Trade-In of Property - Obtain approval from the LAO or location property personnel prior to listing property for trade-in. With approval, the property is listed on the Purchase Order as a trade in. At this time, the AD-107 should also be completed for the property being traded. The AD-107 is to be signed by the Research Leader and the company accepting the trade-in. Include a description of the property as well as the trade-in allowance on the form. The completed AD-107 is sent to the LAO or location property personnel.

Donation of Property - If you have property that is excess to your needs, report it to your RL. Property can be donated to non-profit agencies such as schools, salvation army, however it must first be reported as excess to Department of Excess Personal Property.

Remember: Our first priority regarding excess property is to other research units .

Loaning/Borrowing Government Property

Accountable Property Officers may lend property that could be temporarily out of service to other REE agencies or other Federal agencies. The loan period should not exceed 1 year. However, Accountable Property Officers may extend it if necessary. Accountable Property Officers *may not lend* Government Property for *personal* use.

Loaning to Non-Federal Agencies

APO's may loan property to non-Federal agencies, including State, county public, or individuals for work in support of REE programs. However, a written agreement must be in place to document the work involved.

Borrowing Property

The Accountable Property Officer and the appropriate Property Management Officer will work together to decide if borrowing property will fulfill a need.

Procedures

Regardless of the cost of the item, Accountable Property Officer's will document all instances of loaning/borrowing property on form AD-107 and include the following information:

- item description, serial number, manufacturer name, and model number
- loan period,

Property

- conditions for use,
- maintenance requirements, and
- inspection requirements upon return.

Both the loaning and the borrowing agency will sign the form. The form should be forwarded to the Property Management Officer.

Home Use of Government Equipment

Managers may loan Government property to employees for official work at home. You may not loan or give Government property to employees as a reward, gift, or because the equipment is no longer needed by your unit. If you loan Government property to employees for work-at-home, A Form AD-107 must be completed prior to removal. (Example Attached)

Report of Unserviceable, Damaged, Destroyed, and Lost/Stolen Property

Form AD-112 is used to report property that is unserviceable, damaged, destroyed, or Lost/Stolen.

Employees must immediately report thefts of personal property to their supervisors. The building manager should also be notified. A description of the property and a statement noting you filed a report with the authorities on the specific date (if applicable) should be listed on the AD-112.

Gift Acceptance

Contact your RL and/or LAO regarding the acceptance of gifts. No gifts should be accepted without written approval from the Deputy Area Director.

MOTOR VEHICLES

Proper Use of Government-Owned or Leased Vehicles (GOV)

Government vehicles are maintained by the agency for employees to use when conducting official Government business. Vehicle operators must possess a valid State drivers license and must have their license with them when operating a GOV.

Government vehicles:

- may only be used to conduct official Government Business
- smoking is prohibited
- passengers must wear their seat belts
- only Government employees or approved cooperator employees are to operate and/or occupy a GOV

Vehicle custodians are responsible for ensuring that anyone they instruct to operate a government vehicle has a valid driver's license.

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** If you are unsure as to whether an individual can operate or ride in a Government vehicle, please contact your Location Administrative Officer.**

Government Fleet Card

Each vehicle has a gasoline credit card (VOYAGER) assigned to it. The VOYAGER card should be used for **all vehicle services** offered by a participating merchant. Vehicle operators should use the VOYAGER card at participating retail locations for:

- fuel expenses
- vehicle repairs, and
- vehicle maintenance.

To use the fleet card vehicle operators will have to enter:

- the card's access code/PIN number, and
- the vehicle's current odometer reading

PIN - last 4 digits of Vehicle # printed on card

12345 6789 10113 6 Vehicle 123789 USDA-ARS-MSA A22222

If a card you are trying to use shows up as “invalid” at the pump, try letting the attendant inside scan the card. If you continue to get the same message, contact VOYAGER customer service by dialing the toll free number found on the back of the card. The customer service representative can authorize the purchase over the phone if the card is indeed a valid account number.

The Voyager Card should be kept under lock & key at all times.

Vehicle operators will immediately report lost or stolen cards to their Location Administrative Office.

Maintenance of Vehicles

Government vehicles shall be maintained in a safe operable condition. All Government vehicles must have a Federal Inspection once a year or every 12,000 miles whichever comes first.

Form ARS 45 Vehicle Inspection Checklist (ATTACHED) should be used by a qualified mechanic to perform the inspection. After the inspection has been conducted, the original form ARS 45 should be kept in the glove compartment. A copy of the form should be sent to the Location Administrative Office or Area Property Office. Report all unsafe conditions to your units supervisor.

Vehicle Maintenance Books: Employees who use GOV's are responsible for recording *Non-Voyager* transactions for fuel, oil changes, repairs, and mileage in the Vehicle Maintenance Book located in the glove box of each vehicle. All receipts are to be put in the book for collection at the end of the month. Voyager charges are electronically reported at the time of purchase.

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Motor Vehicle Accidents

All vehicle accidents must be reported regardless to dollar amount of damage or injury.

If you are involved in an accident with a Government vehicle, you must complete a written report of the accident to your supervisor within 48 hours of the incident. The accident report must include:

- Form SF-91, Operator's Report of Motor Vehicle Accident.(ATTACHED) Complete at the time of the accident and on the scene whenever possible.
- Form SF-94, Statement of Witness. Completed by persons who witnessed the accident.
- Form CA-A, Employee Report of Traumatic Injury (if required). Complete for each injured employee.

These forms can be found in the glove compartment of each Government vehicle.

*** A copy of the police report should also be obtained and included with the accident report.

Form AD-112 is used to document damage to Government Vehicle. Two estimates of damage are to be attached to the AD-112.

United States Department of Agriculture		Report No.
Report of Transfer or Other Disposition or Construction of Property		Date
1. Type of Transaction (Report each type separately) <input type="checkbox"/> Transfer <input type="checkbox"/> Sale <input type="checkbox"/> Trade In <input type="checkbox"/> Donation <input type="checkbox"/> Construction <input type="checkbox"/> Rehab <input type="checkbox"/> As-Is	2. Authorization Reference	3. Proceeds Received \$
4. Reporting Agency	5. Receiving Agency (Or Name of Purchaser or Donee):	
A. Organizational Unit	A. Organizational Unit (Or Address of Purchaser)	
B. Location	B. Location	
C. Signature	C. Signature	
D. Title	D. Title	E. Date

Quantity (Or Prop. No.)	Item Description (Give Full Details Including Serial Numbers, If Any, and Condition Code)	Inventory Value

Certifications of Property and Fiscal Officers

7. Property Officer: This transaction is completed and the necessary entries have been made to adjust the property records proceeds, if any, are to be deposited to:	8. Fiscal Officer A. <input type="checkbox"/> The sum indicated below has been received in payment for the property disposed of. B. <input type="checkbox"/> The necessary entries have been made to adjust the accounting records.
	Amount (\$) Schedule No.
Signature Date	Signature Date

REPORT OF UNSERVICEABLE, LOST, STOLEN DAMAGED OR DESTROYED PROPERTY

PROPERTY REPORT NO.

DATE

SECTION I - ACCOUNTABLE PROPERTY OFFICER'S REPORT

1. STATUS OF PROPERTY *(Check only one-report each one type separately)*

- | | |
|--|---|
| <input type="checkbox"/> Unserviceable | <input type="checkbox"/> Lost or Stolen |
| <input type="checkbox"/> Obsolete | <input type="checkbox"/> Cannibalized for parts |
| <input type="checkbox"/> Damaged | <input type="checkbox"/> Destroyed |
| | <input type="checkbox"/> Others |

2. REPORTING ACTIVITY *(Show agency, unit and address)*

3. PROPERTY ITEMS *(See attachment for additional entries)*

QUANTITY (Or property no.) A	ITEM DESCRIPTION AND OTHER DETAILS, INCLUDING SERIAL NUMBERS AND ACQUISITION DATE <i>(Give present condition and estimated cost of repair)</i> B	ACQUISITION COST C	EXPLANATION/DISPOSAL INSTRUCTIONS <i>(If lost, stolen, or destroyed, give detail. Was this reported to proper authorities?)</i> D

4. NAME IN PRINT AND SIGNATURE
OF CUSTODIAN

DATE

5. NAME IN PRINT AND SIGNATURE
OF ACCOUNTABLE PROPERTY OFFICER

DATE

SECTION II - PROPERTY MANAGEMENT OFFICER'S REVIEW AND RECOMMENDATION

DETERMINATION FOR LOST, STOLEN, DAMAGED, OR DESTROYED PROPERTY

1. After due consideration of all known facts and circumstances in this case, it is determined that:

- a. The loss, theft, damage or destruction did not result from employee negligence and any involved employees are hereby relieved of liability.
- b. There appears to be gross negligence involved; therefore, the case returned to agency officials for appropriate action under the Debt Collection Act.
- c. There appears to be negligence involved; therefore, the case is returned to agency personnel officials for consideration of disciplinary action.

2. NAME IN PRINT AND SIGNATURE OF PROPERTY MANAGEMENT OFFICER

3. DATE

SECTION III - AUTHORIZATION FOR CANNIBALIZATION, ABANDONMENT, OR DESTRUCTION OF UNSERVICEABLE PROPERTY

1. Unserviceable property listed above is hereby authorized for cannibalization, abandonment, or destruction in accordance with FPMR 101-45.9 based on any of the following determinations as further explained in section I-3(D):

- | | |
|---|---|
| <ul style="list-style-type: none"> <input type="checkbox"/> a. Property has no commercial value. <input type="checkbox"/> b. Health, safety, or security considerations require immediate abandonment or destruction. <input type="checkbox"/> c. Costs of care and handling exceed expected small lot sales proceeds. <input type="checkbox"/> d. Regulation or directive requires abandonment or destruction. | <ul style="list-style-type: none"> <input type="checkbox"/> e. Property is uneconomical to repair/not needed by another user and may be cannibalized for parts. <i>(Cannibalization is a form of use and property management regulations shall apply. Remainder of property must be disposed of through usual procedures.)</i> |
|---|---|

2. SIGNATURE OF PROPERTY MANAGEMENT OFFICER

3. DATE

SECTION IV - CERTIFICATION FOR COMPLETION OF CANNIBALIZATION, ABANDONMENT, OR DESTRUCTION: *I certify that cannibalization, abandonment, or destruction action for the items authorized under Section III was completed on this date in accordance with I-3(D).*

1. SIGNATURE OF ACCOUNTABLE PROPERTY OFFICER

2. DATE

3. SIGNATURE OF WITNESS

4. DATE

SECTION V - CERTIFICATIONS OF PROPERTY AND FISCAL OFFICERS

1. SIGNATURE OF PROPERTY MANAGEMENT OFFICER *(The necessary entries have been made to adjust property records.)*

2. DATE

3. SIGNATURE OF FISCAL OFFICER *[The necessary action has been taken to adjust the accounting records and, where required by a determination made under Section II above, to effect collection from involved employee(s).]*

4. DATE

**MOTOR VEHICLE
ACCIDENT REPORT**Please read the
Privacy Act State-
ment on Page 3.

INSTRUCTIONS: Sections I thru IX are filled out by the vehicle operator. Section X, Items 72 thru 82c are filled out by the operator's supervisor. Sections XI thru XII are filled out by an accident investigator for bodily injury, fatality, and/or damage exceeding \$500.

SECTION I - FEDERAL VEHICLE DATA

1. DRIVER'S NAME (Last, first, middle)		2. DRIVER'S LICENSE NO./STATE/LIMITATIONS		3. DATE OF ACCIDENT	
4a. DEPARTMENT/FEDERAL AGENCY PERMANENT OFFICE ADDRESS				4b. WORK TELEPHONE NUMBER	
5. TAG OR IDENTIFICATION NUMBER	6. EST. REPAIR COST \$	7. YEAR OF VEHICLE	8. MAKE	9. MODEL	10. SEAT BELTS USED <input type="checkbox"/> YES <input type="checkbox"/> NO
11. DESCRIBE VEHICLE DAMAGE					

SECTION II - OTHER VEHICLE DATA (Use Section VII if additional space is needed.)

12. DRIVER'S NAME (Last, first, middle)		13. DRIVER'S LICENSE NUMBER/STATE/LIMITATIONS			
14a. DRIVER'S WORK ADDRESS				14b. WORK TELEPHONE NUMBER	
15a. DRIVER'S HOME ADDRESS				15b. HOME TELEPHONE NUMBER	
16. DESCRIBE VEHICLE DAMAGE				17. ESTIMATED REPAIR COST \$	
18. YEAR OF VEHICLE	19. MAKE OF VEHICLE	20. MODEL OF VEHICLE		21. TAG NUMBER AND STATE	
22a. DRIVER'S INSURANCE COMPANY NAME AND ADDRESS				22b. POLICY NUMBER	
				22c. TELEPHONE NUMBER	
23. VEHICLE IS <input type="checkbox"/> CO-OWNED <input type="checkbox"/> RENTAL <input type="checkbox"/> LEASED <input type="checkbox"/> PRIVATELY OWNED		24a. OWNER'S NAME(S) (Last, first, middle)		24b. TELEPHONE NUMBER	
25. OWNER'S ADDRESS(ES)					

SECTION III - KILLED OR INJURED (Use Section VIII if additional space is needed.)

26. NAME (Last, first, middle)		27. SEX	28. DATE OF BIRTH
29. ADDRESS			
A	30. MARK "X" IN TWO APPROPRIATE BOXES <input type="checkbox"/> KILLED <input type="checkbox"/> DRIVER <input type="checkbox"/> PASSENGER <input type="checkbox"/> INJURED <input type="checkbox"/> HELPER <input type="checkbox"/> PEDESTRIAN		31. IN WHICH VEHICLE <input type="checkbox"/> FED <input type="checkbox"/> OTHER (2)
	32. LOCATION IN VEHICLE		33. FIRST AID GIVEN BY
34. TRANSPORTED BY		35. TRANSPORTED TO	
36. NAME (Last, first, middle)		37. SEX	38. DATE OF BIRTH
39. ADDRESS			
B	40. MARK "X" IN TWO APPROPRIATE BOXES <input type="checkbox"/> KILLED <input type="checkbox"/> DRIVER <input type="checkbox"/> PASSENGER <input type="checkbox"/> INJURED <input type="checkbox"/> HELPER <input type="checkbox"/> PEDESTRIAN		41. IN WHICH VEHICLE <input type="checkbox"/> FED <input type="checkbox"/> OTHER (2)
	42. LOCATION IN VEHICLE		43. FIRST AID GIVEN BY
44. TRANSPORTED BY		45. TRANSPORTED TO	
46. Pedes- trian	a. NAME OF STREET OR HIGHWAY		b. DIRECTION OF PEDESTRIAN (SW corner to NE corner, etc.)
			FROM TO
	c. DESCRIBE WHAT PEDESTRIAN WAS DOING AT TIME OF ACCIDENT (Crossing intersection with signal, against signal, diagonally; in roadway playing, walking, hitchhiking, etc.)		

SECTION IV - ACCIDENT TIME AND LOCATION (Use Section VIII if additional space is needed.)

47. DATE OF ACCIDENT	48. PLACE OF ACCIDENT (Street address, city, state, ZIP Code; Nearest landmark; Distance nearest intersection; Kind of locality (industrial, business, residential, open country, etc.); Road description).
49. TIME OF ACCIDENT AM PM	

<p>50. INDICATE ON THIS DIAGRAM HOW THE ACCIDENT HAPPENED</p> <p>Use one of these outlines to sketch the scene. Write in street or highway names or numbers.</p> <p>a. Number Federal vehicle as 1, other vehicle as 2, additional vehicle as 3 and show direction of travel with arrow.</p> <p>Example: → 1 2 ←</p> <p>b. Use solid line to show path before accident and broken line after the accident</p> <p>c. Show pedestrian by </p> <p>d. Show railroad by </p> <p>e. Place arrow in this circle to indicate NORTH </p>	<p>51. POINT OF IMPACT (Check one for each vehicle)</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">FED</td> <td style="width:10%;">2</td> <td style="width:80%;">AREA</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>a. FRONT</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>b. R. FRONT</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>c. L. FRONT</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>d. REAR</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>e. R. REAR</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>f. L. REAR</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>g. R. SIDE</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>h. L. SIDE</td> </tr> </table>	FED	2	AREA	<input type="checkbox"/>	<input type="checkbox"/>	a. FRONT	<input type="checkbox"/>	<input type="checkbox"/>	b. R. FRONT	<input type="checkbox"/>	<input type="checkbox"/>	c. L. FRONT	<input type="checkbox"/>	<input type="checkbox"/>	d. REAR	<input type="checkbox"/>	<input type="checkbox"/>	e. R. REAR	<input type="checkbox"/>	<input type="checkbox"/>	f. L. REAR	<input type="checkbox"/>	<input type="checkbox"/>	g. R. SIDE	<input type="checkbox"/>	<input type="checkbox"/>	h. L. SIDE
FED	2	AREA																										
<input type="checkbox"/>	<input type="checkbox"/>	a. FRONT																										
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<input type="checkbox"/>	<input type="checkbox"/>	f. L. REAR																										
<input type="checkbox"/>	<input type="checkbox"/>	g. R. SIDE																										
<input type="checkbox"/>	<input type="checkbox"/>	h. L. SIDE																										

52. DESCRIBE WHAT HAPPENED (Refer to vehicles as "Fed", "2", "3", etc. Please include information on posted speed limit, approximate speed of the vehicles, road conditions, weather conditions, driver visibility, condition of accident vehicles, traffic controls (warning light, stop signal, etc.) condition of light (daylight, dusk, night, dawn, artificial light, etc.) and driver actions (making U-turn, passing, stopped in traffic, etc.).

SECTION V - WITNESS/PASSENGER (Witness must fill out SF 94, Statement of Witness) (Continue in Section VIII.)

A	53. NAME (Last, first, middle)	54. WORK TELEPHONE NUMBER	55. HOME TELEPHONE NUMBER
	56. BUSINESS ADDRESS	57. HOME ADDRESS	
B	58. NAME (Last, first, middle)	59. WORK TELEPHONE NUMBER	60. HOME TELEPHONE NUMBER
	61. BUSINESS ADDRESS	62. HOME ADDRESS	

SECTION VI - PROPERTY DAMAGE (Use Section VIII if additional space is needed.)

63a. NAME OF OWNER	63b. OFFICE TELEPHONE NUMBER	63c. HOME TELEPHONE NUMBER
63d. BUSINESS ADDRESS	63e. HOME ADDRESS	
64a. NAME OF INSURANCE COMPANY	64b. TELEPHONE NUMBER	64c. POLICY NUMBER
65. ITEM DAMAGED	66. LOCATION OF DAMAGED ITEM	67. ESTIMATED COST \$

SECTION VII - POLICE INFORMATION

68a. NAME OF POLICE OFFICER	68b. BADGE NUMBER	68c. TELEPHONE NUMBER
69. PRECINCT OR HEADQUARTERS	70a. PERSON CHARGED WITH ACCIDENT	70b. VIOLATION(S)

SECTION VIII - EXTRA DETAILS

SPACE FOR DETAILED ANSWERS. INDICATE SECTION AND ITEM NUMBER FOR EACH ANSWER. IF MORE SPACE IS NEEDED, CONTINUE ITEMS ON PLAIN BOND PAPER.

SECTION IX - FEDERAL DRIVER CERTIFICATION

In compliance with the Privacy Act of 1974, solicitation of the information requested on this form is authorized by Title 40 U.S.C. Section 491. Disclosure of the information by a Federal employee is mandatory as the first step in the Government's investigation of a motor vehicle accident. The principal purposes for using this information is to provide necessary data for legal counsel in legal actions resulting from the accident and to provide accident information/statistics in analyzing accident causes and developing methods of reducing accidents. Routine use of information may be by Federal, State or local governments, or agencies, when relevant to civil, criminal, or regulatory investigations or prosecutions. An employee of a Federal agency who fails to report accurately a motor vehicle accident involving a Federal vehicle or who refuses to cooperate in the investigation of an accident may be subject to administrative sanctions.

I certify that the information on this form (Sections I thru VIII) is correct to the best of my knowledge and belief.

71a. NAME AND TITLE OF DRIVER	71b. DRIVER'S SIGNATURE AND DATE
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SECTION X - DETAILS OF TRIP DURING WHICH ACCIDENT OCCURRED

72. ORIGIN	73. DESTINATION
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74. EXACT PURPOSE OF TRIP	
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75. TRIP BEGAN	DATE	TIME (Circle one) a.m. p.m.	76. ACCIDENT OCCURRED	DATE	TIME (Circle one) a.m. p.m.
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77. AUTHORITY FOR THE TRIP WAS GIVEN TO THE OPERATOR <input type="checkbox"/> ORALLY <input type="checkbox"/> IN WRITING (Explain)	78. WAS THERE ANY DEVIATION FROM DIRECT ROUTE <input type="checkbox"/> NO <input type="checkbox"/> YES (Explain)
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79. WAS THE TRIP MADE WITHIN ESTABLISHED WORKING HOURS <input type="checkbox"/> YES <input type="checkbox"/> NO (Explain)	80. DID THE OPERATOR, WHILE ENROUTE, ENGAGE IN ANY ACTIVITY OTHER THAN THAT FOR WHICH THE TRIP WAS AUTHORIZED. <input type="checkbox"/> NO <input type="checkbox"/> YES (Explain)
--	--

81. COMPLETED BY DRIVER'S SUPERVISOR	a. DID THIS ACCIDENT OCCUR WITHIN THE EMPLOYEE'S SCOPE OF DUTY <input type="checkbox"/> YES <input type="checkbox"/> NO		b. COMMENTS
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82a. NAME AND TITLE OF SUPERVISOR	82b. SUPERVISOR'S SIGNATURE AND DATE	82c. TELEPHONE NUMBER
-----------------------------------	--------------------------------------	-----------------------

SECTION XI - ACCIDENT INVESTIGATION DATA

83. DID THE INVESTIGATION DISCLOSE CONFLICTING INFORMATION. YES NO (If "Yes", explain below.)

84. PERSONS INTERVIEWED

NAME	DATE	NAME	DATE
a.		c.	
b.		d.	

85. ADDITIONAL COMMENTS (Indicate section and item number for each comment.)

SECTION XII - ATTACHMENTS

LIST ALL ATTACHMENTS TO THIS REPORT

SECTION XIII - COMMENTS/APPROVAL

86. REVIEWING OFFICIAL'S COMMENTS

87. ACCIDENT INVESTIGATOR	88. ACCIDENT REVIEWING OFFICIAL
a. SIGNATURE AND DATE	a. SIGNATURE AND DATE
b. NAME (First, middle, last)	b. NAME (First, middle, last)
c. TITLE	c. TITLE
d. OFFICE	d. OFFICE
e. OFFICE TELEPHONE NUMBER	e. OFFICE TELEPHONE NUMBER

VEHICLE INSPECTION CHECK LIST	VEHICLE NO.	TAG NO.	MILEAGE
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INSTRUCTIONS: Retain the original in the vehicle. Mail one copy to your Servicing Personal Property Section.	YEAR	MAKE	MODEL
	DATE		REGION

Code: **0** = OK **X** = Adjustment Made **R** = Repairs Needed

ENGINE and UNDERHOOD	Code	Repair Estimate	BODY	Code	Repair Estimate
1. Radiator, Cap, Hoses, Coolant		\$	38. Headlights, Alignment		\$
2. Belts: Fan, Alternator, Power Steering			39. Taillights, Back-Up Lights, Stop Lights		
3. Water Pump			40. Turn Signals, 4-Way Flashers		
4. Carburetor Air Cleaner			41. Parking, Clearance Lights		
5. Carburetor Adjustment			42. Glass		
6. Manifold Heat Control Valve			43. Doors, Hood and Trunk <i>(Fit and Latches)</i>		
7. Head Bolts and Manifold Bolts			44. Body Bolts		
8. Engine Mounting Bolts			45. Bumpers		
9. Fuel Pump Pressure			46. Paint, General Appearance		
10. Timing, Spark Plugs, Points			47. Door Locks		
11. Compression			48. Lock, Spare Tire <i>(Trucks)</i>		
12. Battery: Connections, Charge, Water Level			49. Endgate or Tailgate		
13. Alternator and Regulator			50. Windshield Wipers and Washers		
14. Check for oil leaks			51.		
15. Oil Level, Filter, Breather Cap			52.		
16. PCV Valve			INTERIOR		
17. Windshield Washer Fluid			53. Brake Pedal Travel		
18. Air Conditioner, Freon Gas			54. Parking Brake		
19. Power Steering, Oil Level			55. Clutch Pedal <i>(Free play of 3/4 inch)</i>		
20. Electronic Ignition System			56. Mirrors		
21. EPA Exhaust Emission Test <i>(where required)</i>			57. Horn Operation		
CHASSIS			58. Instrumentation Operation, Switches, Dashlights		
22. Front End Alignment			59. Seat Belts, Shoulder Harness <i>(Anchor Bolts, etc.)</i>		
23. Front Wheel Bearings			60. Defroster, Heater		
24. Wheel Lug Bolts			61.		
25. Steering Tie Rods, Drag Link, Idler Arm			MISCELLANEOUS		
26. Shock Absorbers			62. Tires <i>(Condition and Pressure)</i>		
27. Spring and Body "U" Bolts			63. Winch Mechanism		
28. Drive Shaft			64. Road Test		
29. Universal Joints			65. License Plates <i>(Brackets and Bolts)</i>		
30. Differential			66. Jack and Lugwrench		
31. Muffler, Exhaust System			67. Door and Dashboard Decals		
32. Tailpipe, Hangers			68. Emergency Kit		
33. Brakes: Foot and Hand			69. Cost of Inspection <i>(Labor)</i>		
34. Brake Cylinders, Brake Fluid Reservoir			70. Repairs Made <input type="checkbox"/> Yes <input type="checkbox"/> No		
35. Automatic Transmission <i>(Bands, Linkage, Fluids, etc.)</i>			71.		
36.			72.		
37.					
SUB-TOTAL		\$	TOTAL REPAIR ESTIMATE		\$

NAME AND ADDRESS *(Custodian or Operator)*

NAME AND ADDRESS OF FIRM MAKING INSPECTION