



**The Trust**  
 Arizona School Risk Retention  
 Trust, Inc.

1112 W. Camelback Rd. • Phoenix, AZ 85013 • (602) 266-4911 • FAX (602) 266-7754

**AUTOMOBILE LIABILITY LOSS REPORT FORM**

FOR TRUST USE ONLY	
DATE RECEIVED:	INITIAL
FILE NO.:	

<b>SCHOOL DISTRICT</b>	District Name:					
	Contact Person:	Phone No.				
<b>FACTS</b>	Date of Loss:	Time: <input type="checkbox"/> AM <input type="checkbox"/> PM	No. of Vehicles Involved:	No. of Persons Injured:		
	Location of Accident:			<input type="checkbox"/> Intersection <input type="checkbox"/> Nonintersection		
	City:	<input type="checkbox"/> Inside <input type="checkbox"/> Outside	County:	Weather:		
	Motor Vehicle Involved with:	<input type="checkbox"/> 1. Pedestrian <input type="checkbox"/> 2. Other Motor Vehicle	<input type="checkbox"/> 3. Other School Vehicle <input type="checkbox"/> 4. Fixed Object	<input type="checkbox"/> 5. Other		
<b>SCHOOL VEHICLE</b>	Year:	Make:	Model:	License No.:	State:	
	District Vehicle No.:	Date of Purchase:	Mileage:	VIN No.:		
	Point of Impact on Vehicle:	Removed to:	Removed by:	Estimated Cost of Repair: \$		
	Driver Name:		Address:		Phone:	
	School/Department:	Drivers License No.:	<input type="checkbox"/> Operator <input type="checkbox"/> Chauffeur	Exp. Date:	State:	
	Year:	Make:	Model:	License No.:	State:	
<b>OTHER VEHICLE</b>	Owner's Name:		Address:		Phone:	
	Point of Impact on Vehicle:	Removed to:	Removed by:	Estimated Cost of Repair: \$		
	Driver Name:		Address:		Phone:	
	Insured by:	Drivers License No.:	<input type="checkbox"/> Operator <input type="checkbox"/> Chauffeur	Exp. Date:	State:	
	To Property Other Than Vehicles:			Estimated Damage: \$		
<b>PROPERTY DAMAGE</b>	Name and Address of Owner of Other Property:					
<b>INJURIES TO NON-EMPLOYEES</b>	Student or Injured Party:		Phone:	Date of Birth:		
	Address:					
	Description of Injury:					
	Parent/Guardian Name:		Home Phone:	Work Phone:		
	Address:					
	Student or Injured Party:		Phone:	Date of Birth:		
	Address:					
	Description of Injury:					
	Parent/Guardian Name:		Home Phone:	Work Phone:		
	Address:					

