



SAN DIEGO FIRE-RESCUE DEPARTMENT

VEHICLE INCIDENT PACKAGE

- Did Incident:**
- a. Occur on City property
  - b. Damage only to City property
  - c. Non-injury

If the answer is "YES" to all three, PD contact and PD report is NOT required.

IN CASE OF A VEHICLE INCIDENT OR INDUSTRIAL INCIDENT  
COMPLETE THE ENCLOSED FORMS:

**CD-1551 EMPLOYEE VEHICLE/INDUSTRIAL INCIDENT DAMAGE REPORT**  
OPERATOR OF VEHICLE MUST COMPLETE THIS FORM

**CD-1555 – SUPERVISOR VEHICLE/INDUSTRIAL INCIDENT INVESTIGATION REPORT**  
SUPERVISOR MUST COMPLETE THIS FORM

DOCUMENTS MUST BE TYPED AND COMPLETED ON ELECTRONIC FORMS

ELECTRONIC FORMS CAN BE FOUND ON VECTOR SOLUTIONS, M-DRIVE, OR WEB PORTAL

**Driver/Operator must submit CD-1551 to supervisor within 72 hours**

**Supervisor must submit CD-1555 along with any supporting documentation, to Battalion Chief or appropriate supervisor within seven calendar days of incident notification date**

DIRECT QUESTIONS TO THE DRIVER TRAINING OFFICER AT (619)  
692-4981

DELIVER COMPLETED, SIGNED AND DATED FORMS AND PHOTOS  
TO:

**PROFESSIONAL STANDARDS UNIT at MS 601**

## VEHICLE INCIDENT DOCUMENTATION

UNIFORMED AND NON-UNIFORMED PERSONNEL ARE TO UTILIZE THE FOLLOWING GUIDELINES WHEN INVOLVED IN A VEHICLE ACCIDENT IN AN SDFD/LIFEGUARD VEHICLE OR PRIVATE VEHICLE (POV) ON AUTHORIZED CITY BUSINESS.

**A. WHEN A FIRE DEPARTMENT VEHICLE IS INVOLVED IN A VEHICLE INCIDENT**

1. THE DRIVER/OPERATOR OR OFFICER IN CHARGE SHALL NOTIFY ECDC AND PROVIDE THE FOLLOWING INFORMATION:
  - A. NATURE OF INCIDENT (INJURY OR NON-INJURY, NATURE OF INJURIES AND THE NUMBER INJURED)
  - B. EQUIPMENT INVOLVED (UNIT ID) AND APPARATUS NUMBER
  - C. EXACT LOCATION
  - D. TYPE OF ASSISTANCE NEEDED (ADDITIONAL ENGINE, AMBULANCE, TOW TRUCK, POLICE, DUTY MECHANIC)
  - E. EXTENT OF DAMAGE
  - F. TIME OF INCIDENT
2. ECDC WILL NOTIFY:
  - A. BATTALION CHIEF OF UNIT INVOLVED
  - B. BATTALION 36 (LOGISTICS BATTALION CHIEF)
  - C. IMMEDIATE SUPERVISOR
  - D. HEALTH AND SAFETY OFFICER
  - E. SHIFT COMMANDER
  - F. LAW ENFORCEMENT (IF THERE ARE INJURIES, OR DIDN'T OCCUR ON CITY PROPERTY, OR DAMAGE ISN'T LIMITED TO CITY PROPERTY)
  - G. IF INCIDENT INVOLVES A NON-FIRE DEPARTMENT VEHICLE, THAT DEPARTMENT WILL BE NOTIFIED

**B. WHEN A LIFEGUARD VEHICLE IS INVOLVED IN A VEHICLE INCIDENT**

1. THE DRIVER/OPERATOR WILL PROVIDE THE FOLLOWING INFORMATION TO LCC:
  - A. NATURE OF INCIDENT (INJURY OR NON-INJURY, NATURE OF INJURIES AND THE NUMBER INJURED)
  - B. EQUIPMENT INVOLVED (UNIT ID) AND APPARATUS NUMBER
  - C. EXACT LOCATION
  - D. TYPE OF ASSISTANCE NEEDED (ADDITIONAL ENGINE, AMBULANCE, TOW TRUCK, POLICE, DUTY MECHANIC)
  - E. EXTENT OF DAMAGE
  - F. TIME OF INCIDENT
2. LCC WILL NOTIFY:
  - A. ON-DUTY MARINE SAFETY LIEUTENANT (LT)
  - B. MARINE SAFETY CAPTAIN
  - C. IMMEDIATE SUPERVISOR OF PERSON(S) INVOLVED IN THE INCIDENT
  - D. LAW ENFORCEMENT (IF THERE ARE INJURIES, OR DIDN'T OCCUR ON CITY PROPERTY, OR DAMAGE ISN'T LIMITED TO CITY PROPERTY)

A PROOF OF INSURANCE MEMO IS INCLUDED IN THIS PACKAGE FOR PRESENTATION AS REQUIRED BY LAW.

BATTALION CHIEFS AND AMBULANCE PROVIDER SUPERVISORS WILL BE RESPONSIBLE FOR TAKING PHOTOGRAPHS OF THE INCIDENT SCENE. PERSONNEL SHALL MAKE NO STATEMENTS, VERBAL OR WRITTEN, TO ANYONE EXCEPT INVESTIGATORS FROM RISK MANAGEMENT, POLICE, AND SDFD/LIFEGUARD OFFICIALS.