

CITY OF SAN DIEGO

Distribution
Submit this form and CD-1551 to your department Screener within seven (7) days of the receipt of CD-1551. SDFD follow Standard Instructions (S.I.).

Supervisor Vehicle/Industrial Incident Investigation Report for Police, Fire-Rescue and Lifeguards

REMINDER. Commercial Drivers, follow the Post-Accident Testing Criteria. All supervisor's if there is suspicion the employee is under the influence, contact SDPD for assistance.

	Date of Incident	Time of Incident	(Check One and	oyee's Name Print Name Below) acker □ Spotter □ Other □	Employee PERNR#	Equipment Apparatus#	Vehicle License Plate#	Driver License# and Class	
	Date Reported								
Cit	xy Vehicle M	lake:		Model:		Year:			
	Incident Properly Reported: Yes □ No □ Photos Taken: Yes □ No □ Authorized to Drive Vehicle: Yes □ No □								
Collision Report Taken: Yes No Agency:Officer ID#Collision Report Event #:									
	Did Incident: a. Occur on City property: Yes □ No □ b. Damage only to City property: Yes □ No □ c. Non-injury: Yes □ No □ If the answer is "Yes" to ALL three, PD contact and a PD report is NOT required.			If Y PD SD ontact and a	SDPD VEHICLES ONLY: Code 3: Yes □ No □ If Yes, include Responding Incident or Event #: PD:# SDFD VEHICLES ONLY: Code 3: Yes □ No □ If Yes, include Responding Incident or Event #: FD:#				
De	Department:Division:MS#								
Su	Supervisor's name filling out this report (Print):Phone#								
Address/Location of Incident:									
Were any injuries reported at the scene by: Employee(s): Yes□ No□ Public: Yes□ No□									
Employee Vehicle was: Parked □ Proceeding Forward □ Stopped in Traffic □ Left Turn □ Right Turn □ Backing □									
Changing Lanes □ Preparing to Stop □ Other:									
Road Conditions: Dry □ Wet □ Off Road □ Weather Conditions: Clear □ Cloudy □ Rainy □ Fog/Mist □ Dark □									
ln۱	estigating (Supervisor ((Narrative Required)						
▼ Use this area to sketch or draw incident									
	Indicate North with Arrow in Circle								
						Please indicate vehicand circle all damage			
						Veh	nicle	Vehicle	
ln۱	estigating	Supervisor I	Name:		Signature:			Date:	

Vehicle/Industrial Incident Processing Form for Police, Fire-Rescue and Lifeguards									
Screener Employee's Name:									
Screener's Name: Incident Date/Time:									
Date CD-1551 & CD-1555 Received at Screener:Screening Date:									
Type: Vehicle Industrial No Vehicle/Industrial Non-Preventable									
No Vehicle/Industrial Preventable Vandalism/Crime									
Cause of Incident (Reference CVC Worksheet):									
Incident Category: 1A 1B 2 3 4 Non-Preventable Explanation:									
Employee Preventable Incident History within LCFYP None									
DATE CATEGORY/POINTS ASSIGNED	D DISCIPLINE								
1st:									
2nd:									
3rd:									
4th:									
Employee accepted screening: Yes (complete incident history and forward to AA)	No (forward to IRC Chair)								
Incident Review Committee									
Hearing Date:IRC Screening Results/Recommendations:									
Type: Vehicle Industrial No Vehicle/Industrial Non-Preventable									
No Vehicle/Industrial Preventable Vandalism/Crime									
Incident Category: 1A 1B 2 3 4 Non-Preventable									
IRC Chair Signature:	_ Date:								
4 4									
Appointing Authority/Assistant or Deputy Chief Appointing Authority imposed discipline:									
Does discipline deviate from Discipline Chart? Yes No No (If imposed discipline deviates from the Discipline Chart, a detailed justification MUST be provided and be approved by the Appointing Authority/Assistant or Deputy Chief before issued)									
Served by (print):	_ Date:								
Appointing Authority Signature:	_ Date:								
Assistant or Deputy Chief Signature:	_ Date:								
Employee accepted discipline: Yes No No Employee requested appeal hearing: Date requested:									
Appeals									
Appeals Date: Imposed discipline (final action from the appeal):									
Appeal Hearing Officer Signature:	_ Date:								
Chief's Signature:	_ Date:								
Does discipline deviate from Discipline Chart? Yes No (If imposed discipline deviates from the Discipline Chart, a detailed justification MUST be provided and be approved by the Chief before issued).									