

# SUPERVISOR'S ACCIDENT INVESTIGATION REPORT

*"Why is understanding never accepted—  
until experience is gained?"*

**RETAIN A COPY OF REPORT AND  
MAIL ORIGINAL TO ERIE INSURANCE**

The only way to avert accidents is to locate and eliminate accident causes. There is always some reason for an accident (an unsafe act or an unsafe condition, or both). Sometimes the cause cannot be removed in a practical manner, but usually can be controlled and a repetition avoided.

**INSURED:**

**POLICY NUMBER:**

**CLAIM NUMBER:**

<b>IDENTIFICATION</b>	DATE OF ACCIDENT	HOUR	<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.	EMPLOYEE'S NAME
	COMPANY OR BRANCH			DEPARTMENT/SECTION
	LOCATION OF ACCIDENT ..... .....			
<b>TYPE</b>	TYPE OF INJURY OR DAMAGE ..... .....			
	DESCRIPTION OF HOW ACCIDENT OCCURRED ..... ..... ..... .....			
<b>DESCRIPTION</b>	NAMES OF WITNESSES: .....			
	<b>CAUSE</b>	DID AN UNSAFE ACT OF AN EMPLOYEE CONTRIBUTE TO THIS ACCIDENT? ..... .....		
DID AN UNSAFE CONDITION ON THE PREMISES CONTRIBUTE TO THE ACCIDENT? ..... .....				
<b>REMEDY</b>	WHAT CAN BE DONE OR WHAT HAS BEEN DONE TO PREVENT A RECURRENCE? ..... .....			

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

DATE OF THIS REPORT	EMPLOYEE'S SIGNATURE	SUPERVISOR'S SIGNATURE
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