**Vandalia Bus Lines Passenger Incident Report**

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| **DRIVER NAME:** |  |  | **DATE OF REPORT:** |  |
| **CHARTER #:** |  |  | **GROUP NAME:** |  |

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| **INCIDENT INFORMATION** |
| **PASSENGER:** |  |  | **PASSENGER PHONE #:** |  |
| **DATE OF INCIDENT:** |  |  | **TIME OF INCIDENT:** |  |
| **LOCATION:** |  |
| **SPECIFIC AREA OF LOCATION:** |  |
| **ADDITIONAL PERSON(S) INVOLVED:** |  |
| **WITNESS NAME & PHONE #**  |  |
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| **INCIDENT DESCRIPTION INCLUDING ANY EVENTS LEADING TO OR IMMEDIATELY FOLLOWING THE INCIDENT:** |
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| **EMPLOYEE EXPLANATION OF EVENTS / CIRCUMSTANCES:** |
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| **RESULTING ACTION EXECUTED, PLANNED, OR RECOMMENDED:** |
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| **DRIVER NAME:** |  | **DRIVER SIGNATURE:** |  | **DATE:** |  |
| **WITNESS NAME:** |  | **WITNESS SIGNATURE:** |  | **DATE:** |  |