

CONTACTS:

Northern Region Safety Officer:

(907) 451-2280 Office

(907) 322-0603 Cell

Central Region Safety Officer:

(907) 269-5403 Office

(907) 744-3717 Cell

Southcoast Region Safety Officer:

(907) 465-8991 Office

(907) 723-1625 Cell

Division of Risk Management

(907) 465-2180

**OSHA
24 HOUR HOTLINE
800-321-6742**



ACCIDENT PROCEDURES



Our mission is to
"Keep Alaska Moving through service and
infrastructure."

Vehicle Accident/Incident

In the event of an accident or incident involving a motor vehicle that is state owned, privately owned or rented resulting in **bodily injury or death of a person, or where property damage is more than \$2,000, the driver (employee) shall immediately notify, by the quickest means, the Alaska State Troopers or local law enforcement. (AS 28.35.080).** If not investigated by a law enforcement agency, Form 12-209 MUST be completed and sent to the address on the form.

Afterwards and as soon as possible, the driver (employee) shall notify their Supervisor and Regional Safety Officer (as well as State Equipment Fleet if State-owned vehicle).

The following forms must be completed and forwarded as soon as possible:

1. Supervisor's Accident Investigation Report
2. Employee's Accident/Mishap Report
3. Liability Accident Notice, **Form # 02-919**
4. **Form # 12-209** IF NOT INVESTIGATED by Law Enforcement
5. Photos of the vehicle/s involved and the incident scene
6. Employer Report of Injury or Illness-**Form #7-6101**; (MANDATORY even if the employee is not injured), **Due (10) days**
7. Employee Report of Injury-**Form# 7-6100**; (MANDATORY If the employee was injured; OPTIONAL if the employee was not injured) **Due (30) days**

Employee Accident/Injury

All employee incidents and accidents, with or without injury, shall be immediately reported to a supervisor.

In the event of an incident/accident that is **fatal to one or more employees, or requires inpatient hospitalization of one or more employees**, the supervisor shall immediately notify the Regional Safety Officer. *NOTE-If the Regional Safety Officer cannot be reached, call the Alaska Department of Labor (AKOSH). **Reporting to AKOSH must be made immediately but no later than 8-hours after the incident. (AS 18.60.058).**

For all injury incidents, the following forms must be completed and forwarded as soon as possible:

1. Employer Report of Occupational Injury or Illness, **Form #07-6101 Due (10) days**
2. Employee Report of Occupational Injury or Illness, **Form #07-6100 Due (30) days**
3. Supervisor's Accident Investigation Report
4. Employee's Accident/Mishap Report
5. Photos of the tools/equipment/machinery involved and the incident scene

Damage to Property

In the event of an accident or incident that results in damage to property, the supervisor shall, upon discovery, notify the Regional Safety Officer. If the Regional Safety Officer cannot be reached call the State of Alaska's Risk Management Division.

When the estimated damage exceeds \$15,000.00, Risk Management shall be immediately notified by telephone or the quickest means.

The following forms must be completed and forwarded as soon as possible:

1. Supervisor's Accident Investigation Report
2. Employee's Accident/Mishap Report
3. Employer Report of Occupational Injury or Illness (IF the employee was injured), **Form # 07-6101 Due (10) days**
4. Employee Report of Occupational Injury or Illness (IF the employee was injured), **Form # 07-6100 Due (30) days**
5. Photos of the tools/equipment/machinery involved and the incident scene
6. Liability Accident Notice, Form # 02-919