FDOT and Agen cy Veh#s	Accide nt date	Driver Name	Status of Agency Accident Investigatio n & Final Report	List cause( s) of each accide nt	Injuries? List who was injured in the accident and their relationsh ip to the Agency	Medical care and follow-u p resolved ?	Results of post-accid ent drug/alcoh ol testing	Proper ty damag e: \$ amt for FDOT vehicle	At fault: Agen cy or other party ?	Agency Driver receive d a citation ?	Date Vehicle repairs complete d?	List and timeline of corrective actions and follow up: driver retraining, discipline, revised policy, etc	Accident reported to FDOT District Six within 24 hours? (Require d)