

MADISON COUNTY ROAD DEPARTMENT
VEHICLE /EQUIPMENT ACCIDENT FORM

Contact Person: Helen Keller Phone: 601-855-5673

Date of Accident: 5/5/16

LOCATION OF ACCIDENT: Hwy 22, Canton, MS 39046

TIME OF ACCIDENT: 2:05 p.m.

NARRATIVE REPORT/SUMMARY OF ACCIDENT:

Claimant was traveling on highway, passed mowing tractor; rocks thrown and shattered back glass

Driver's Name: Hudson O.O. DOB: _____

Last Name, First Name MI M/D/Y

on side of vehicle

Driver's License No. _____ State: _____

Address: 120 PUGH Rd., Flora, MS 39071

Telephone Number: Office: 601-858-5670 Home: 601-879-8317

Check one: County Vehicle _____ County Equipment Inventory Number T-18

Vehicle/Equipment Identification Number: _____

Year: _____ Make: _____ Model: _____

Description of Injuries, if any: NONE

Damages to Your Vehicle: _____

Authority Notified: _____

Were Pictures Taken: Yes No

Officer's Name: _____ Report or File Number: _____

OTHER PERSON(S) INVOLVED

Name: Justin Lum DOB: _____

Address: 600 Crescent Blvd Suite B, Ridgeland, MS 39157

Driver's License Number: _____

Work #: _____ Home #: _____ Other #: 601-218-2956

VEHICLE INVOLVED

Is this a county vehicle/piece of equipment? _____ yes no

Vehicle Identification Number: _____ Lic. Plate Number: _____

Year: 2012 Make: Ford Model: F350

Description of Injuries, if any: NONE

Damages to Vehicle: shattered back glass on side of vehicle

Injuries: NONE Nature: N/A Fatality: N/A

Hospital: N/A City: N/A State: N/A

Vehicles Towed: N/A

Immediate Supervisor

Department Head

DELTA GLASS & DOORS
312 SOUTH MOUND STREET
P. O. BOX 1065
YAZOO CITY, MS 39194
PHONE: 662/746-1983 FAX: 662/746-8864

FAX COVER SHEET

DATE: 5-6-16

TO: Helin Keller

COMPANY: Madison Co.

PHONE: _____

FAX: 601-859-5857

NO. OF PAGES (INCLUDING COVER SHEET): 1

FROM: J.P. Sullivan

MESSAGE: _____
Justin Kern - 2012 F350 Ford Crew Cab
Back Pass. Door glass
already called \$190.00

IF THERE ARE ANY PROBLEMS WITH THE TRANSMISSION OF THIS FAX PLEASE CONTACT DELTA GLASS & DOORS AT THE ABOVE NUMBERS.



