



# inroads

March 2010

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**Administration**

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**Wethersfield Repair Facility**

60 State Street (rear)  
Wethersfield, CT 06109  
**860-529-0500**

**Norwich Repair Facility**

171 Salem Turnpike  
Norwich, CT 06360  
**860-885-2153**

**New Haven Repair Facility**

140 Pond Lily Avenue  
New Haven, CT 06515  
**203-397-4590**

**After Hours Emergencies**

Call **1-877-454-4204** (toll-free)  
Your call will be answered through the Department of Environmental Protection Dispatch Office, which will assist you.

**Online**

Go to [www.das.state.ct.us](http://www.das.state.ct.us) and click on **FLEET OPERATIONS** for additional information on fueling locations, accident forms and mileage reports.

Last year's budget resolution included the provision to consolidate several Boards and Commissions into the Department of Administrative Services. How does that im-

## We Have Moved!



act Fleet? In order to accommodate the incoming departments and staff, some office reassignments were necessary, and as a result we are now in a new home. The Fleet office is still located in the State Office Building, although we are now on the ground floor. The new location is in the far west end of the building, room G-19. When entering from the main parking lot located between Buckingham Street and Capitol Avenue, go straight to the end of the hall, turn left, and proceed towards the southwest corner, that's where you will find us.

## Web Page Updates

Several improvements have recently been made to the Fleet page on the DAS site. Besides some reorganization, and installing new links that will take you directly to the area you are interested in, the primary change has been to create a section for accident information. The goal of creating this

new section is to provide some specific direction for ATA's and drivers about what needs to occur when there is an accident. In the coming months we will further enhance this section by including information on driver training solutions that we are in the process of developing. We will keep you posted as this new section continues to evolve, and hope that you find the changes to be helpful.

## Need a Car or Truck?



With Enterprise still on the "only use if you really have to" list, we can meet your temporary transportation needs by offering vehicle rentals on a daily, or even hourly basis. You choose the period that is best for your situation. And remember gas is always included in the very competitive rate.

In addition to our Hartford office, cars and vans are available from the Wethersfield, New Haven and Norwich maintenance locations. It's a cost-effective and practical solution for your short-term vehicle needs. Fee and authorization information are posted on our web page.

# Coming Soon ....

A revised version of the form used to report accidents (previously known as the MVCU-1) is almost ready to go! In the near future each time a vehicle from your agency is involved in an accident the driver will go to the Fleet Operations page of the DAS website to access the Accident Information link and complete the form. Using the free version of Adobe Acrobat reader, this form can be completed electronically, printed, then scanned to be included as an attachment in email or faxed to the Fleet Administration office. If using the free version of Acrobat you will not be able to save the document to your computer. If using Adobe Acrobat Professional, the form can be saved to your computer (renamed accordingly), completed electronically and emailed to Fleet as an attachment. It'll be that easy. Of course we can't completely do away with paper as all police reports or other miscellaneous data related to the accident can be sent to Fleet via fax or inter-office courier.

We will notify all ATAs when this form becomes available online. Here's a sneak peak of the form.

**DAS Vehicle Incident/Accident Report**

State of Connecticut  
 DEPARTMENT OF ADMINISTRATIVE SERVICES  
 OFFICE OF FLEET OPERATIONS  
 165 Capitol Avenue  
 Hartford, CT, 06106

AGENCY NAME (INCLUDE REGION, DIVISION, BUREAU, UNIT) \_\_\_\_\_ VEHICLE LICENSE PLATE # \_\_\_\_\_  
 NAME OF THE DRIVER'S SUPERVISOR \_\_\_\_\_ EMAIL ADDRESS OF SUPERVISOR \_\_\_\_\_

**DRIVER/VEHICLE INFORMATION**  
**VEHICLE #1 - STATE OF CT VEHICLE**  
 DRIVER'S LICENSE # \_\_\_\_\_ STATE \_\_\_\_\_ DRIVER'S NAME \_\_\_\_\_ SEX \_\_\_\_\_  
 DATE OF BIRTH \_\_\_\_\_ HOME ADDRESS \_\_\_\_\_ CITY/TOWN \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 DRIVER'S WORK PHONE # \_\_\_\_\_ DRIVER'S PHONE # \_\_\_\_\_  
 DRIVER'S WORK EMAIL ADDRESS \_\_\_\_\_ OWNER OF VEHICLE (if different) \_\_\_\_\_ STATE \_\_\_\_\_  
 MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ PLATE # \_\_\_\_\_ YEAR \_\_\_\_\_ MAKE \_\_\_\_\_ MODEL \_\_\_\_\_  
 VIN # \_\_\_\_\_ VIN # \_\_\_\_\_  
 INSURANCE COMPANY NAME & POLICY # \_\_\_\_\_  
 INSURANCE COMPANY PHONE # \_\_\_\_\_

**VEHICLE #2 - OTHER VEHICLE/PROPERTY PEDESTRIAN/CYCLIST**  
 DRIVER'S LICENSE # \_\_\_\_\_ DRIVER'S NAME \_\_\_\_\_ SEX \_\_\_\_\_  
 DATE OF BIRTH \_\_\_\_\_ HOME ADDRESS \_\_\_\_\_ CITY/TOWN \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 DRIVER'S PHONE # \_\_\_\_\_  
 OWNER OF VEHICLE (if different) \_\_\_\_\_ STATE \_\_\_\_\_  
 MAKE \_\_\_\_\_ MODEL \_\_\_\_\_  
 VIN # \_\_\_\_\_

VEHICLE CATEGORY  
 ASSIGNED TO YOU  POOL CAR  RENTAL

**INCIDENT INFORMATION**  
 DATE \_\_\_\_\_ TIME \_\_\_\_\_  
 CITY/TOWN \_\_\_\_\_ NO. OF VEHICLES \_\_\_\_\_  
 Location: Occurred on \_\_\_\_\_  
 ROUTE/HWY # OR STREET NAME \_\_\_\_\_  
 CLOSEST INTERSECTION \_\_\_\_\_ ROUTE #, EXIT # OR STREET NAME \_\_\_\_\_

DESCRIBE NON VEHICLE PROPERTY DAMAGE IF APPLICABLE INCIDENT/ACCIDENT INFORMATION:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

WAS YOUR VEHICLE TOWED  Y  N  
 WAS POLICE ACCIDENT REPORT RECEIVED?  Y  N  
 NAME OF POLICE DEPT. ON SCENE \_\_\_\_\_  
 NAME/BADGE # OF POLICE OFFICER \_\_\_\_\_  
 CASE # \_\_\_\_\_

**DESCRIBE DAMAGE Vehicle 1** Check box(es) representing vehicle damage area.  
 FRONT  REAR  SIDE

**DESCRIBE DAMAGE Vehicle 2** Check box(es) representing vehicle damage area.  
 FRONT  REAR  SIDE

CALL TO THE SCENE  Y  N  
 BRING MEDICAL ASSISTANCE  Y  N  
 CONTACTS TO THE INCIDENT  Y  N  
 NAME AND CONTACT INFORMATION \_\_\_\_\_

**NON COLLISION WITH:**  
 OVERTURN  
 SPILL  
 FIRE  
 SUBMERSION  
 JACKKNIFE  
 EXPLOSION  
 OTHER \_\_\_\_\_

**TRAFFIC CONTROLS**  
 NONE  
 TRAFFIC SIGNALS  
 STOP SIGN  
 YIELD SIGN  
 LANE CONTROL  
 VISIBLE ROAD MARKINGS  
 OFFICER/FLAGMAN  
 RR CROSSING FLASHER GATE  
 NO PASSING ZONE  
 OTHER \_\_\_\_\_

**ROAD DESIGN**  
 INTERSTATE  
 OTHER DIVIDED HWGHWY  
 ROAD NOT DIVIDED (2-WAY)  
 ONE WAY DRIVEWAY  
 ACCESS WAY  
 OTHER \_\_\_\_\_

**ROAD CONDITIONS**  
 DRY  
 WET  
 SNOW/SLUSH  
 ICE  
 MUDDY  
 DEBRIS  
 SAND/DUST/OIL  
 POT HOLE  
 UNDER CONSTRUCTION  
 OTHER \_\_\_\_\_

**WEATHER CONDITION**  
 CLEAR  
 FOGGY  
 CLOUDY  
 RAINING  
 SLEETING  
 SNOWING  
 OTHER \_\_\_\_\_

**LIGHT CONDITION**  
 DAYLIGHT  
 SUNGLARE  
 DAWN/DUSK  
 NIGHT - ROAD LIT  
 NIGHT - ROAD NOT LIT

BARRIER/FENCE \_\_\_\_\_  
 EMBANKMENT \_\_\_\_\_  
 FIRE HYDRANT \_\_\_\_\_  
 DITCH/CURB \_\_\_\_\_  
 PARKING METER \_\_\_\_\_  
 OTHER \_\_\_\_\_

TEMPORARY DRIVEWAY \_\_\_\_\_  
 PARKING LOT \_\_\_\_\_  
 HIGHWAY \_\_\_\_\_  
 OTHER \_\_\_\_\_