



Exhibit B

Accident Procedures Form

In the event of an accident, report a claim to Loyola's Risk Management Department (RM) at 312-915-7861 or 312-915-7454. Send a copy of the Accidents Procedures Form to riskmanagement@luc.edu. Do not discuss accident or provide information to any unauthorized individuals, admit guilt or fault to anyone at the scene of the accident, or sign any statements.

Date of Accident: _____

Accident Location: _____

Accident Description:

Your Vehicle Information:

Driver's Name: _____

Date of Birth: _____

Driver's Address: _____

Driver's License # and State: _____

Vehicle License Plate #: _____

Phone Number: _____

Information About the Other Vehicles:

Owner's Name & Address: _____

Driver's Name _____

Date of Birth: _____

Driver's Address: _____

Driver's License # and State: _____

Phone Number: _____

Witnesses:

Name: _____ Phone #: _____

Name: _____ Phone #: _____

Name: _____ Phone #: _____