

MELBOURNE AND METROPOLITAN TRAMWAYS BOARD

EMPLOYEES' ACCIDENT NOTE BOOK

IMPORTANT

IN CASE OF ACCIDENT OR DELAY, RING CONTROL
IMMEDIATELY: SERVICE PHONE 30 OR
PUBLIC PHONE FJ 3279 OR FJ 2488.

M. M. T. B.

TO DRIVERS AND CONDUCTORS

DON'T TAKE CHANCES — TAKE CARE

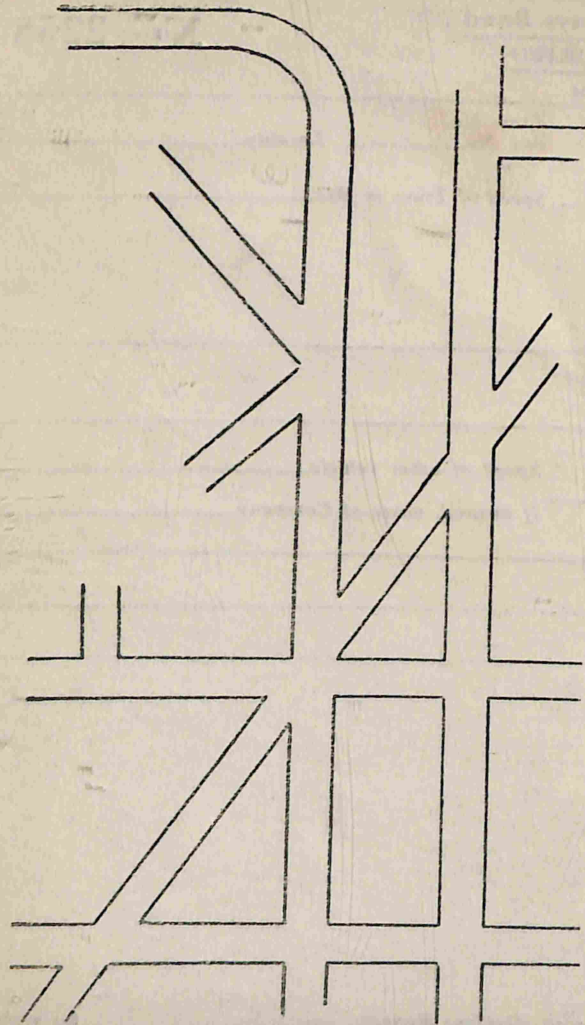
BE ON THE ALERT AND PREVENT ACCIDENTS —
REMEMBER A MINUTE FOR SAFETY BEATS A MONTH
FOR REPAIRS.

ALL ACCIDENTS MUST BE REPORTED

Notes taken at time of Accident

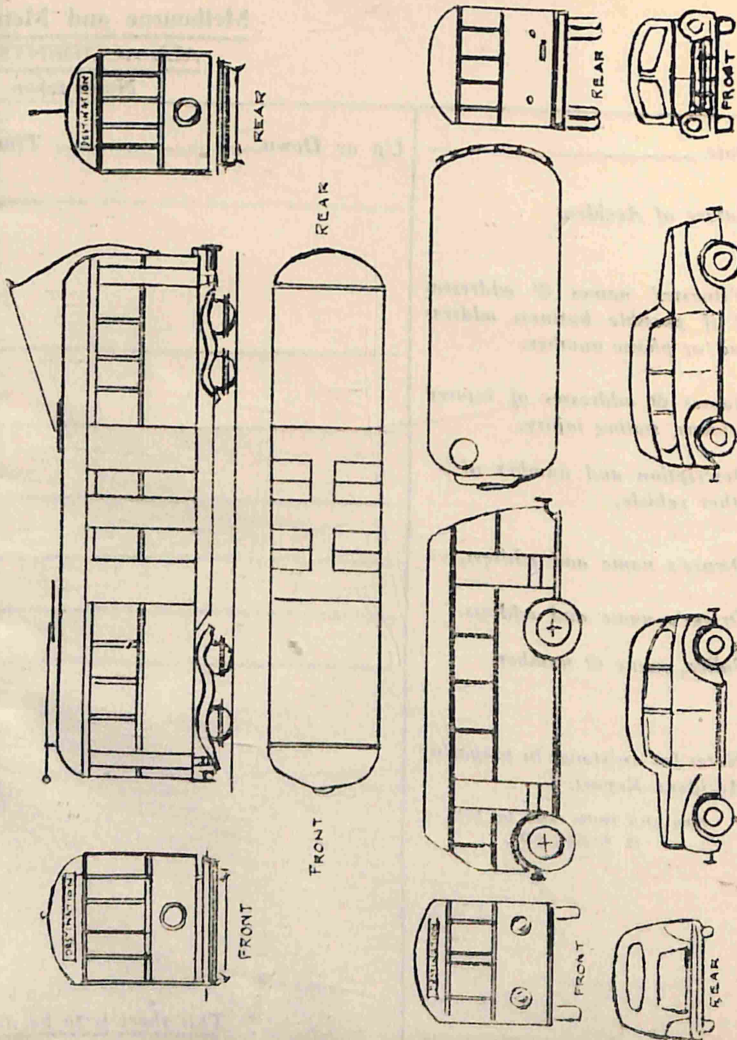
Date.....	Up or Down.....	Time.....	a.m. p.m.	Tram No. Bus No.....	Locality.....
Nature of Accident	Speed of Tram or Bus.....				
Witnesses' names & addresses & if possible business address and/or phone number.					
Names & addresses of injured persons, stating injury.					
Description and number of other vehicle.	Speed of other vehicle.....				
	If insured, name of Company.....				
Owner's name and address.					
Driver's name and address.					
Police, name & number.					
Notes for assistance in preparing Accident Report.					
(See also Rules 168 to 179 re Accidents.)					

DIAGRAM



The Conductor or Driver will show on the above diagram at a suitable point the exact location of Tram or Bus and other vehicle or persons concerned in the accident. Give names of streets and cross streets and show with arrows the direction in which each vehicle was travelling.

Mark the point of impact on the Tram or Bus and on other vehicle.



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Witnesses' names & addresses & if possible business address and/or phone number.

Names & addresses of injured persons, stating injury.

Description and number of other vehicle.

Owner's name and address.

Driver's name and address.

Police, name & number.

Notes for assistance in preparing Accident Report.

(See also Rules 168 to 179 re Accidents.)

Speed of other vehicle.....

If insured, name of Company.....