

Important information about this form

This Notice of Incident and Claim form must be used by a person who proposes to commence court proceedings or claim financial damages relating to property or personal injury in relation to an incident arising out of the condition of a freeway or arterial road.

If you are considering making a claim, you must complete and return this form to the Department of Transport and Planning (DTP) within 30 days of the incident occurring.

This form is set out in five parts:

Part A – provides important information about your rights to obtain compensation and in respect of privacy.

Part B – provides space for you to set out information about the circumstances of the incident

Part C – provides space for you to set out details of any claim for damages you may wish to make against DTP.

Part D – provides important information about disclosure of information to other organisations.

Part E – is a Declaration.

Part A – Important information about your rights

If you suffer personal injury or property damage due to the condition of a road or road infrastructure, you may be entitled to compensation from the responsible road authority. DTP is not liable for loss or damage arising out of all incidents on roads. DTP is unlikely to be liable to pay compensation:

- if the incident did not occur on an arterial road or freeway. DTP Register of Public Roads, located on the Transport Victoria website at transport.vic.gov.au, contains a list of the roads for which DTP is responsible;
- for tar damage, or for damage caused by the condition of non-road infrastructure, for example, the condition of tram tracks, electricity poles, pit lids, bus or tram shelters, or public phones, that is not the responsibility of DTP;
- for property damage in an amount less than or equal to the threshold amount. The threshold amount is \$1681, indexed annually in accordance with the Consumer Price Index. (Note: Where DTP is liable to pay compensation for property damage, the payment is reduced by the threshold amount. Further, the threshold amount does not apply to damage arising from personal injury or to any claim that may involve a contractor engaged by a road authority.); or
- if it has complied with the standards established in its Road Management Plan and other relevant Codes and policies.

A court may, in any proceeding based on a claim in relation to an incident arising out of the condition of a public road or infrastructure, take a failure to give a notice of incident into account in deciding the weight to be given to evidence about the condition of the road or infrastructure at the time of the incident. Within 14 days of receiving a Notice of Incident and Claim form, the road authority may inspect the road or infrastructure where the reported incident occurred and may prepare a Condition Report. If it does so, a copy of the Condition Report will be sent to the person who reported the incident. A copy of the report is admissible as evidence of the matters specified in the report in any legal proceedings in relation to the incident.

Privacy statement

The information disclosed by you in the Notice of Incident and Claim form may be used to investigate the incident, consider and respond to a claim (including in the course of legal proceedings), to take any necessary remedial action in respect of the road and/or road infrastructure and for the purpose of analysing accidents and planning and implementing road management and safety measures. We may disclose any information you provide to our insurers and advisers, including investigators and legal advisers, and to any other organisation we consider might have responsibility in respect of this incident. Some of the information we ask for is required to be provided under section 115 of the Road Management Act 2004. If the information is not provided, we may not be able to consider your claim. You have a right of access to information we collect about you. For further information, contact the Information Privacy Co-ordinator at privacy@transport.vic.gov.au.

Where to send your Notice of Incident and Claim form:

To lodge a Notice of Incident and Claim, please complete the form and return it with your supporting evidence to:

Customer Resolutions Roads
GPO Box 2392 Melbourne, VIC
3001 Australia

Further information

Further information about the Road Management Act 2004, including a copy of the Act, is available on the Vic Gov website at vic.gov.au. Alternatively, phone **13 37 78** or go to the Transport Victoria website at transport.vic.gov.au and send an enquiry via 'Contact us' on the homepage

Part B: Notice of incident

Note – This report must be received within 30 days from the date of incident.

This is a notice of incident provided in accordance with

- 1. Road Management Act 2004; and
- 2. Road Management (General) Regulations 2016

Claimant Details

Please fill out the details section as follows:

- Individual details: You are making the claim for yourself or on behalf of another individual.
- Business Details: You are making the claim on behalf of an organisation.

Individual details

Title	Given name(s)	Surname
Home address	Postcode	
Postal address (if different from above)	Postcode	
Phone number	Email	

Business details

Business name	
ABN	
Business address	Postcode
Postal address (if different from above)	Postcode
Business contact title	
Business contact name	
Business contact number	
Business contact email:	

Incident details

Please provide details of the incident, completing as many fields as possible.

Date	D	D	M	M	Y	Y	Y	Y	Time (am/pm)	Road conditions
Weather at time of incident										
Road name										Locality (city/suburb/town)
Traffic Direction	North	South	East	West	Other (please specify)					
Map reference i.e. Melways (MEL), VicRoads Country Directory (VCD) or GPS Coordinates (Latitude/Longitude)										
Nearest intersection										Distance to intersection (M/KM):
Direction of nearest Intersection	North	South	East	West	Other (please specify)					

Road Infrastructure involved (traffic light, signs, fences, poles, pit lids, etc.):

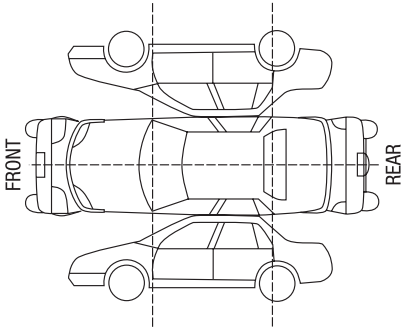
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- Was the road infrastructure or other infrastructure damaged as a result of this incident? Yes No
- Do you believe your vehicle or other property damaged was due to the condition of the road or road infrastructure or other infrastructure? Yes No

Part B: Notice of Incident (continued)

Description of the incident: (If insufficient space, please complete on a separate page, signed and dated and attached to this form.)

Please mark on the diagram provided the areas where your vehicle sustained damage. Additionally, please list in writing which parts of the vehicle were affected. (If insufficient space, please complete on a separate page, signed and dated and attached to this form.)



Additional information

Police Report

Was the incident reported to the police? Yes ☐ No ☐ If yes, please provide the following details.

Officer name:	Date reported	D	D	M	M	Y	Y	Y	Y
Police station									

Was a police report created? Yes ☐ No ☐ If yes, please attach a copy to your claim.

Witnesses

Were there any witnesses to the incident? Yes ☐ No ☐ If yes, please provide the following details.

Witness 1

Full name				
Address	Postcode			

Witness 2

Full name				
Address	Postcode			

Notice of Incident and Claim

ABN 69 981 208 782

Part C: Notice of claim

Type of damage or loss

Please indicate what damage or loss is being claimed – vehicle or other property damage, personal injury or some other form of damage or loss.

Property damage

Describe the property damaged i.e. building, vehicle, personal belongings etc. If damage includes vehicle, please provide the details of the vehicle such as make and model.

Claim amount: \$

Claim calculation*

* Attach to this form two quotations for the cost of repairs or a final paid invoice(s).

Please note, where DTP is liable to pay compensation for property damage, the payment is reduced by the threshold amount in accordance with section 110 of the Road Management Act 2004

Personal injury

Was anyone injured in the incident? Yes ☐ No ☐

Note: If the injured person who may make a claim has not yet contacted the TAC they should immediately contact the TAC by telephoning **1300 654 329** or at **tac.vic.gov.au**.
If yes, please provide the following details:

Full name

Address

Postcode

Describe the personal injury

Claim amount: \$

Claim calculation*

* Attach to this form any evidence of medical costs incurred

Other damage or loss

Describe the other damage/loss:

Claim amount: \$

Claim calculation*

* Attach to this form any evidence of other damage/s or loss incurred

Insurance information

Was an insurance claim made? Yes ☐ No ☐ If yes, please provide the following details.

Insurer Name

Insurer Address

Postcode

Insurance Policy Number

Part D: Disclosure of information

Important notice

DTP may not be the organisation responsible for the road or the infrastructure or the incident. We may need to send details of your claim (including any personal or commercially sensitive information we obtain in relation to the claim) to another organisation so that it can:

- investigate the incident;
- consider any claim for compensation, including any legal proceedings against them;
- enable remedial action to be taken (if necessary) in relation to the road and/or infrastructure; and
- gather information for the analysis of the causes of accidents and the planning and implementation of road management or safety measures.

By signing the Declaration below, you consent to disclosure of this Notice of Incident and Claim form and any other information that is obtained by DTP in respect of the claim to any person or organisation we consider may be responsible for this incident.

Part E: Statutory declaration

I (Full name)				
of (Address)	Postcode			

1. All the information contained in this Notice of Incident and Claim form is accurate to the best of my knowledge and belief
2. I have to the best of my knowledge and belief disclosed all relevant information to DTP and have not withheld any relevant information.
3. Any attached quotation for repairs has been prepared for the sole purpose of repairing any damage directly resulting from the incident as described in this Notice of Incident and Claim form.

By signing the declaration below, I acknowledge and declare the information I have provided is true and correct to the best of my knowledge.

Signature of person making this declaration	Declaration date	D	D	M	M	Y	Y	Y	Y
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