

**Warning:** This card is not to be used for the registration of a privately-owned vehicle. Any person using this card for such a purpose may be subject to criminal prosecution.



## State of Georgia Government Vehicle Georgia Liability Insurance Identification Card

Insurer: State of Georgia DOAS/RMS Self Insurance Program  
Policy Numbers: TCP – 401 – 14 – 24 / CGL – 401 – 14 – 24  
Coverage: July 1, 2024 – June 30, 2025  
Insured: State of Georgia Government or State employees while operating a vehicle within the scope and course of employment.

Card Issued by DOAS Risk Management Services – Fleet

---

KEEP THIS CARD IN YOUR MOTOR VEHICLE WHILE IN OPERATION

***Report accidents within 24 hours***

If you are in an accident, be sure to get the following information before leaving the area:

- 1) Date, Time, Place;
- 2) Your Vehicle – year, make, model, tag;
- 3) Describe Accident. Include:
  - Direction each vehicle was traveling, weather conditions
  - Details of accident.
- 4) For all individuals include: name, address, employer, home and work phone numbers. Describe injuries claimed and observed; ID hospital, if applicable;
  - Insured (State Employee) driver
  - Your passengers
  - Other driver
  - His/ her passengers
  - Witnesses
- 5) Other vehicle(s): year, make, model, tag, insurance co. and policy #
- 6) Police: agency, officer, citations issued (?), to whom?

# WHAT TO DO IN CASE OF AN ACCIDENT

1. Notify Public Safety or Police Officials from the scene of the accident. Make sure you get a report number and other pertinent information. If you find damage to the vehicle and there was not an accident, you must still call Public Safety and file a police report for the damages.
2. Contact KSU Risk Management to notify of accident IMMEDIATELY -
  - Incident Reporting: <https://www.kennesaw.edu/planning-construction/environmental-health-safety/incident-reporting>
  - Telephone: (470) 578-2599
  - Email: [riskmanagement@kennesaw.edu](mailto:riskmanagement@kennesaw.edu)
  - *Please, do not call DOAS directly*, KSU Risk Management will notify DOAS.
3. Fill out appropriate forms available at [risk.kennesaw.edu/resources](http://risk.kennesaw.edu/resources):
  - Driver Notification Form
  - Supervisor's Accident Follow up Checklist
  - Liability Incident Report Form
  - SR-13 Personal Report of Accident
4. Completed forms should be returned to KSU Risk Management **within 24 hours**. Email [riskmanagement@kennesaw.edu](mailto:riskmanagement@kennesaw.edu)

Kennesaw State University  
Insurance & Risk Management  
Telephone: (470) 578-2599  
Email: [riskmanagement@kennesaw.edu](mailto:riskmanagement@kennesaw.edu)