

Houston Police Department Heavy Duty Wrecker Incident Management Report

Submitted by _____ Primary Company _____

Secondary Company _____

Date: _____ Location: _____ Zone _____

Dispatched Time _____ Arrival Time _____ Recovery Start Time _____ Scene Clearance Time _____
(All lanes open)

Check all that apply

Weather		Scene Type		Traffic		Road Type	
Clear	<input type="checkbox"/>	Accident	<input type="checkbox"/>	Heavy	<input type="checkbox"/>	Freeway	<input type="checkbox"/>
Sunny	<input type="checkbox"/>	Rollover -Truck	<input type="checkbox"/>	Medium	<input type="checkbox"/>	Service Road	<input type="checkbox"/>
Rain	<input type="checkbox"/>	Rollover -Trailer	<input type="checkbox"/>	Light	<input type="checkbox"/>	Street/Roadway	<input type="checkbox"/>
Ice	<input type="checkbox"/>	Lost Load	<input type="checkbox"/>				
Flooding	<input type="checkbox"/>	If lost load, list cargo type below					
Foggy	<input type="checkbox"/>					Fatality involved	<input type="checkbox"/>
Number of heavy duty trucks on scene		<input type="checkbox"/>				Photos taken	<input type="checkbox"/>
Number of tow/recovery personnel on scene		<input type="checkbox"/>				Video taken	<input type="checkbox"/>

Were you dispatched to the correct location with adequate details of the scene? Yes / No – If **No** please explain.

Did you experience any issues with traffic while enroute to the scene? Yes / No – If **Yes** please explain.

Upon arrival, was any additional support equipment required? Yes / No
If **Yes**, please explain equipment type needed, time of request and time of arrival.

Include any factors that would enhance recovery efforts and improve scene clearance time.

Additional Comments:

**Please return form to Auto Dealers Detail via fax at 832-394-4801 or email to
hpd.autodealers@houstonpolice.org**