INSTRUCTIONS FOR COMPLETING DA FORM 3946

1. For detailed instructions on completing this form, see FM 19-26.

2. Special instructions are as follows:

a. "Injury Class" and "Severity of Damage." Traffic accidents are classified according to severity in terms of degree of injuries or property damage sustained. Definitions of the terms are contained in Appendix B, AR 190-5.

b "Sketch of Collision." Draw the collision scene exactly as you observed it. If opinions about the events that led up to the collision can be substantiated with observable facts, indicate these on the sketch. When required by local policy, a detailed, scaled diagram may accompany this form; recommended format is contained in FM 19-26.

c. "Description of Collision."

(1) Will include information not on sketch or not on other parts of the form. Describe special conditions or events associated with the collision such as vehicle(s) on fire, immersed or submerged, roadway lights not operating, operator restrictions, color *(shade)* of clothing of pedestrians, etc. If not sufficient space, supplemental pages may be attached.

(2) When form is completed from information received after vehicle(s) have been moved, or removed from the accident scene or from reports from other agencies *(e.g., civil police, etc.)*, the report will be completed in as much detail as possible; the source of the information will be identified in "Description of Collision."

3. Release of Information. AR 25-55 controls the release of information and records from Army files and traffic accident information will not be released outside the provisions of the regulation. This form contains statements of fact and information normally releaseable to victims, subjects, witnesses or other persons having interest in a particular accident. Copies of the form may be released to those individuals. Coordination with local staff judge advocate should be made prior to all releases.

4. Distribution:

a. Original: Forward to the commander concerned, utilizing DA Form 3975 (*Military Police Report*) as the transmitting document.

b. A copy of the form is maintained in the originating office.

c. A third copy will be made for release as required by AR 340-17.

MILITARY POLICE TRAFFIC ACCIDENT REPORT For use of this form, see AR 190-45; the proponent agency is PMG.																	
PRIVACY ACT STATEMENT AUTHORITY: Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN). PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified. ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval. DISCLOSURE: Disclosure of your social security number is voluntary.																	
1. PM AC	TIVITY CODE/	REPORT NO.						3. TIME OF ACCIDENT Use 2400 hour)					4. DAY OF WEEK OF COLLISION (Sunday, Monday, etc.)				
5. LOCATION OF ACCIDENT																	
a. MILITARY RESERVATION b. NAME AND LOCATION OF MILITARY RESERVATION (Include City and State, etc.) YES NO												te, etc.)					
c. ROAD OR STREET ON WHICH ACCIDENT OCCURRED d. NAME OF INTERSECTING STREET IF AT INTERSECTION																	
e. NAME OF NEAREST INTERSECTING STREET, HIGHWAY, OR OTHER PERMANENT IDENTIFYING LANDMARK IF NOT AT INTERSECTION										DIRECTION							
h. IF ACCIDENT OCCURRED OFF MILITARY RESERVATION, AND OUTSIDE CITY LIMITS, INDICATE:																	
i. KIND OF LOCALITY Troop Billets Residential Mfg or Industrial Open Country Business Other (Specify)																	
6. TYPE C	OF ACCIDENT																
Vehicle	e-Vehicle	Vehicle	-Obiect	5	Single Vehicle	(Non	Collis	ion)		a. SEVER	ITY	ГҮ					
Vehicle-Pedicycle Vehicle-RR Train Hit and Run Stolen Vehicle Vehicle-Pedestrian Other (Specify)							NO. KILLED NO.					NO. INJURED					
b. TOTAL NO. OF VEHICLES INVOLVED							PROPERTY DAMAGE ONLY						AGE ONLY				
7. WEATH	ier, light, a	ND ROAD CO	NDITION	IS													
VEHICLE 1 2				VEHICLE CHARACT			ER VEHICLE SUF			SURFACE	VEHI0 1	CLE 2	WEATHER				
	One	\$	Г		Straight				Cond	rete			Clear				
	Two t			Curve			Blac			к Тор		Rain					
	Three or More			Level			Brick			k			Fog				
	Divided Highway			On Grade			Grave			el			Snowing				
	Other			Other			Other			r			Other				
VEHICLE 1 2	CO	NDITIONS	,	VEHICLE 1 2		DEFECTS					VEHICLE LIGHT 1 2						
	Dry		F	Holes, Ruts, Bum					ps, etc.				 Daylight				
						Loose Material on Surface						Dawn					
	Mud Defective Sh												Dusk				
	Snow No defects											Dark, Street Lights					
Other					Other							Dark, No Street Lights					
8. TRAFFIC CONTROL																	
VEHICLE VEHICLE							VEHICLE					VEHICLE					
				1 2				1 2					1 2				
	Stop and Go	Signal			ng Light			-	Warr	ning Sign			One way Street				
	No Traffic Signal			Officer or Watchman			Solid Center Line			,	Stop Sign						
	Other (Expla								•								

9a. VEHICLE NO. 1							9b. VEHICLE NO. 2									
USA REG LICENSE	GISTRATION OR	MA	AKE	YEAR	BODY TYPE	USA RE	CA REGISTRATION OR MAKE CENSE NO.				YEAR	BOI	OY TYPE			
UNIT MARKINGS/DECAL NO. Privately Owned Government						UNIT N	GS/DEC.	Privately Owned Government								
REGISTERED OWNER (If not driver) (Last, First, MI)						REGISTERED OWNER (If not driver) (Last, First, MI)										
ADDRESS OF OWNER							ADDRESS OF OWNER									
NAME AND ADDRESS OF INSURANCE COMPANY OR AGENT						NAME AND ADDRESS OF INSURANCE COMPANY OR AGENT										
10a. DR	RIVER NO. 1					10b. DRIVER NO. 2										
NAME (Last, First, MI), Grade and Address) SSN						NAME (Last, First, MI), Grade and Address) SSN										
AGE Male Female						AGE Male Female										
DRIVER'S LICENSE/PERMIT NUMBER STATE							DRIVER'S LICENSE/PERMIT NUMBER STATE									
LIMITATIONS ON LICENSE/PERMIT NO YES (Specify) YES (Specify) YEARS' DRIVING						LIMITATIONS ON LICENSE/PERMIT										
CODES	CAT (1)	INJ (2)	SEAT E (3)		SEAT POS (4)	CODES CAT (1) INJ				(2)) SEAT E (3)		SEA	T POS (4)		
11. OCC	CUPANTS		ł	k		8										
							VEH				T	CODES				
NAME AND ADDRESS							NO.	AGE	SEX	CAT (1)	INJ (2)	SEA BELT		SEAT POS (4)		
						DDES										
(1) CATEGORY (2) INJURY CLASS							(3) SHOULDER/LAP BELTS (4) SEAT POSITION									
A. Army OfficerA. No InjuryB. Army EnlistedB. Dead at SceneC. Other Service OfficerC. Dead on ArrivalD. Other Service EnlistedD. Died in HospitalE. CivilianE. Incapacitating InjuryF. DependentF. Non-incap (evident) InjuryO. OtherG. Possible InjuryH. Injury Unknown						A. Lap Belt Used1. Front LeftB. Shoulder Harness Used2. Front CenterC. Both Used3. Front RightD. Not Used4. Back LeftE. Not Installed5. Center BackF. Lap Belt Failed6. Back RightG. Shoulder Harness Failed7. Other Position (Bus-Motorcycle)H. Both Failed8. Position UnknownU. Unknown7.										