PRELIMINARY SUMMARY REPORT
POSSIBLE CLAIM UNDER TEXAS TORT CLAIMS ACT
(Chapter 101, Texas Civil Practice and Remedies Code)

1. U. T. Institution ___________________________ Report No. _______

2. Date of incident causing possible claim ___________________ Time ______

3. Name and address of possible claimants:
   _______________________________________________________
   _______________________________________________________
   _______________________________________________________

4. Names and addresses of all known witnesses:
   _______________________________________________________
   _______________________________________________________
   _______________________________________________________

5. If university motor vehicle involved, attach a copy of Accord Form No. 2 prepared for insurance company and list:
   a. Make and number of vehicle __________________________
   b. Name of driver ______________________________________
   c. Location of incident __________________________________
   d. Extent of personal injuries to driver and passengers ______________
   e. Extent of property damage ________________________________
   f. Was traffic citation issued? _____yes _____no If yes, to whom and for what violation?
   g. Insurance carrier has been notified: _____yes _____no
6. Describe incident: Indicate equipment involved and its condition; identify premises (real or personal property) condition or use involved. For example, if incident involved a "slip and fall," describe the condition of the floor. Attach additional material as needed.

7. Has possible claimant or representative indicated intention to proceed with legal action? ____yes ____no If yes, explain.

8. Name of attorney, if known

Reported by ___________________________ Date ______________________

Department of Institution ____________________________

Distribution: Original to Litigation Manager, Office of General Counsel, The University of Texas System; Copy to Executive Vice Chancellor for Business Affairs.

TTCA No. 1