

Vehicle Glass Damage Notice

Instructions:

1. Use this form for all owned, leased, or rented vehicle (on-road/off-road) for glass damage only. You may use your own form if it includes all the requested data.
 - a. **This form is not to be used for "Admin Fleet Services" leased vehicles. Those glass repairs must be processed through Holman Maintenance.**
 - b. To report vehicle damage, please complete the [Vehicle Crash/Damage Notice](#) or see additional instructions at www.mn.gov/admin/risk.
2. Complete and submit this form and the following to claims.rmd@state.mn.us or by fax: 651-297-7715:
 - a. The paid invoice from the glass repair shop.
 - i. NOTE: Wiper blades or other maintenance related items may not be covered.
 - b. Agency's proof of payment to the glass repair shop.
 - c. SWIFT invoice billed to Risk Management Division for reimbursement.
3. A claim will not be processed until all documents are received.

Section 1: Insured Entity

Agency/Campus: _____ Address: _____
Contact Person: _____ Email: _____ Phone: _____

Section 2: Insured Vehicle Information

License Plate: _____ VIN: _____
Make: _____ Model: _____ Year: _____ Asset/Unit Number: _____
Driver First Name: _____ Last Name: _____
Email: _____ Phone Number: _____

Section 3: Incident Information

Incident Date: _____ Time: _____ City: _____ State: _____
Street/Highway/Intersection: _____
Cause of Damage: _____

Other Party Involved, Contact and Vehicle Information (if applicable): _____
