IF YOU HAVE AN AUTO ACCIDENT

STOP IMMEDIATELY

Take all necessary precautions to prevent further accidents at the scene.

SEND FOR HELP – DO NOT LEAVE

Ask a passing motorist or some other person to contact the State Police or call 911.

GET NAMES & PHONE NUMBERS OF WITNESSES

Fill out the accident report form and notify your supervisor.

DO NOT

Make a statement of any kind to anyone other than your employer, an enforcement officer, a representative of Crawford and Company or the Division of Risk Management.

IMPORTANT

IF ANYONE IS INJURED
OR
THE VEHICLES ARE DISABLED

PHONE
1.866.219.6120

or FAX
1.804.673.9425
COMMONWEALTH OF VIRGINIA  
Automobile Loss Notice Form

INJURY TO PEOPLE: TELEPHONE IMMEDIATELY if possibility of injury exists (No matter how minor).  
DAMAGE TO PROPERTY: IF SERIOUS, (Vehicle Disabled) TELEPHONE IMMEDIATELY  
OTHER: If vehicle is insured for collision and disabled due to damage - TELEPHONE IMMEDIATELY.  

If claim is under Comprehensive, Fire or Theft, only sections marked with * need to be completed  
DO NOT DISCUSS ACCIDENT WITH ANY ONE EXCEPT COMPANY REPRESENTATIVE OR POLICE.

<p>| <strong>POLICY-</strong> | <strong>TIME AND PLACE OF ACCIDENT</strong> | <strong>STATE AGENCY OR COMMUNITY SERVICES BOARD as Insureds Use Only</strong> | <strong>OTHER AUTO INVOLVED</strong> | <strong>PASSENGERS</strong> | <strong>INJURIES (No Matter How Minor)</strong> |
|HOLDER** | DATE OF ACCIDENT | HOUR A.M. | LOCATION | STREET OR HIGHWAY | CITY | COUNTY | STATE | | NAME | ADDRESS: STREET | CITY | STATE | ZIP CODE | PHONE NUMBER | |</p>
<table>
<thead>
<tr>
<th>PROPERTY DAMAGE OTHER THAN AUTO</th>
<th>NAME OF OWNER</th>
<th>ADDRESS</th>
<th>STREET</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>KIND OF PROPERTY</th>
<th>ESTIMATED COST OF REPAIR</th>
<th>WHERE MAY PROPERTY BE SEEN?</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>NAMES</th>
<th>ADDRESSES:</th>
<th>STREET</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
<th>PHONE NUMBERS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>WITNESSES</th>
<th>ON WHAT STREET OR ROAD WERE YOU DRIVING?</th>
<th>DIRECTION</th>
<th>SPEED</th>
<th>STREET OR ROAD OTHER AUTO WAS DRIVING ON?</th>
<th>DIRECTION</th>
<th>SPEED</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>WERE YOUR LIGHTS ON?</td>
<td></td>
<td></td>
<td>WERE THE OTHER AUTO'S LIGHTS ON?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>YES □ NO □ BRIGHT □ DIM □</td>
<td></td>
<td></td>
<td>YES □ NO □ BRIGHT □ DIM □</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>DID EITHER DRIVER GIVE SIGNAL OF ANY KIND?</td>
<td></td>
<td></td>
<td>IF INTERSECTION, WHO ENTERED FIRST?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>YES □ NO □ IF YES, WHO?</td>
<td></td>
<td></td>
<td>WHO HAD RIGHT OF WAY?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>WHICH DRIVER VIOLATED TRAFFIC ORDINANCE?</td>
<td></td>
<td></td>
<td>CHARGE:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>DID POLICE INVESTIGATE ACCIDENT?</td>
<td>YES □ NO □</td>
<td></td>
</tr>
<tr>
<td></td>
<td>DESCRIBE, IN YOUR OWN WORDS, HOW ACCIDENT HAPPENED:</td>
<td></td>
<td></td>
<td>POLICE ADDRESS:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DESCRIPTION OF ACCIDENT</th>
<th>SHOW ON THE DIAGRAM THE POSITION OF ALL AUTOS, PERSONS, STOP LIGHTS, STOP SIGNS AND OTHER OBJECTS, SHOW STREET NAMES</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| NOTE: By terms of your policy, the company must be given reasonable opportunity to examine auto before repairs are made. |

<table>
<thead>
<tr>
<th>LOCATION OF BREAKAGE</th>
<th>□ DOOR □ VENT □ REAR □ WINDSHIELD □ OTHER, DESCRIBE</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>TYPE OF GLASS</th>
<th>TINTED □ SAFETY □</th>
<th>TYPE OF BREAK</th>
<th>CRACKED □ CHIPPED OR POTTED □</th>
</tr>
</thead>
<tbody>
<tr>
<td>CLEAR □ PLATE □</td>
<td>SHATTERED □ BULL'S EYE ♦ □</td>
<td>HALF MOON ♣</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>WINDSHIELD DAMAGE: CHECK ITEMS ABOVE AND MARK LOCATION ON DIAGRAM:</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>*GLASS BREAKAGE</th>
<th>DO YOU THINK A CLAIM WILL BE MADE AGAINST YOU?</th>
<th>BY WHOM?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>YES □ NO □ UNCERTAIN □</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DATE OF REPORT</th>
<th>SIGNATURE</th>
</tr>
</thead>
</table>
In case of an accident or breakdown when you should not leave your vehicle, fill out this card and hand it to a passing motorist.

<table>
<thead>
<tr>
<th>DRIVER'S NAME</th>
<th>TYPE OF ASSISTANCE NEEDED</th>
<th>LOCATION OF VEHICLE</th>
<th>CONTACT</th>
<th>CALL A WRECKER</th>
<th>CALL AN AMBULANCE</th>
<th>CALL NEAREST POLICE DEPARTMENT</th>
<th>OUT THE INSTRUCTIONS BELOW:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

TO A PASSING MOTORIST

YOUR ASSISTANCE WILL BE APPRECIATED IN CARRYING OUT THE INSTRUCTIONS BELOW:

CALL NEAREST POLICE DEPARTMENT

CALL AN AMBULANCE

CALL A WRECKER

CONTACT, AT:

LOCATION OF VEHICLE

TYPE OF ASSISTANCE NEEDED

DRIVER'S NAME

BA0802 09-94
### INFORMATION EXCHANGE

Use this card to obtain key information from the other driver involved.

<table>
<thead>
<tr>
<th>NAME</th>
<th>TELEPHONE NO.</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADDRESS: STREET</td>
<td>CITY</td>
</tr>
<tr>
<td>NAME OF YOUR INSURANCE COMPANY</td>
<td></td>
</tr>
<tr>
<td>YEAR AND MAKE OF VEHICLE</td>
<td>ARE YOU THE OWNER?</td>
</tr>
<tr>
<td>INJURED PASSENGERS</td>
<td>ADDRESSES:</td>
</tr>
<tr>
<td>WITNESSES</td>
<td>ADDRESSES:</td>
</tr>
</tbody>
</table>

Use Reverse Side If Necessary
Cellular: Emergency #77

Administrative Headquarters, Richmond, 24-hour response: 804-674-2000

Emergency TDD: 1-800-553-3144  Emergency TDD (Voice): 1-800-552-9965

Division 1 (Central Virginia): Emergency Toll-Free: 1-800-552-9965

Division 2 (Culpeper): Emergency Toll-Free: 1-800-572-2260

Division 3 (Appomattox): Emergency Toll-Free: 1-800-552-0962

Division 4 (Wytheville): Emergency Toll-Free: 1-800-542-8716

Division 5 (Hampton Roads): Emergency Toll-Free: 1-800-582-8350

Division 6 (Salem-Roanoke): Emergency Toll-Free: 1-800-542-5959

Division 7 (Northern Virginia): Emergency Toll-Free: 1-800-572-4510
EFFECTIVE AT 12:01 am ON 12-31-2000

IN CASE OF ACCIDENT, PLEASE CALL Crawford and Company at:

1-866-219-6120
TO: The Head of each State Agency, Department, Institution and School of Higher Education

FROM: Colonel W. Gerald Massengill

SUBJECT: Section 52-4 of the Code of Virginia, of 1950, as amended

Attached for your information is the directive issued to the Head of each State Agency, Department, Institution and School of Higher Education establishing the Uniform Accident Prevention and Safety Program for all agencies of state government which use state-owned motor vehicles.

This Directive established the requirement for reporting accidents involving state-owned vehicles and the requirement that all state-owned vehicle crashes be investigated by sworn employees of the Department of State Police, except those occurring on the grounds of state colleges, universities or community colleges with police departments.

Effective immediately state-owned vehicle crashes occurring on the state parking facilities and the adjacent highways under the jurisdiction of the Virginia Capitol Police are to be reported to and investigated by the Capitol Police.

Please be governed accordingly.

WGM/RBS/mj
MEMO - 2001 - NO. 10 Revised

TO:     All Employees
FROM:   Colonel W. Gerald Massengill

SUBJECT: The Interdepartmental Vehicle Accident Prevention and Safety Program

MEMO - 2000 - NO. 6 is hereby canceled.

Pursuant to the provisions of Section 52-4, of the Code of Virginia, of 1950, as amended, a Uniform Accident Prevention and Safety Program for all agencies of state government which use state-owned motor vehicles is hereby established.

This program is established to emphasize the importance of safe driving, to develop a sense of responsibility among all employees in the operation of state-owned vehicles and to create an awareness of the need to drive defensively at all times by fostering a spirit of competition among state agencies and employees operating state-owned vehicles.

I. ACCIDENT REPORTING AND INVESTIGATION REQUIREMENTS

The effectiveness of an Accident Prevention and Safety Program is dependent on a complete and impartial investigation of each crash so that a thorough evaluation can be made as to the causative factors. The prompt reporting of a crash to the Department of State Police, to the police department of any state college, university or community college, if the crash occurs on the college grounds, or to the Capitol Police if the crash occurs on one of the state parking facilities or on the adjacent highways under the jurisdiction of the Virginia Capitol Police, while the vehicle is at the crash scene is imperative to the success of this program. (See Attachment)

A. Whenever a traffic crash occurs involving a state-owned motor vehicle, the operator or a representative of the agency owning or using the vehicle shall
immediately report the crash to the Department of State Police, to the police department of any state college, university or community college, if the crash occurs on the college grounds or to the Capitol Police within their area of responsibility, while the vehicle is at the crash scene. All traffic crashes involving licensed state-owned vehicles and crashes involving non-licensed state-owned vehicles where a licensed vehicle is also involved shall be investigated by the Department of State Police, the police department of any state college, university or community college, or by the Capitol Police, except:

1. Crashes in which the vehicle has been removed from the scene unless the crash is the result of a hit and run or personal injury is involved. This does not include moving the vehicle from the highway as a safety precaution.

2. Damage to a vehicle is discovered after the fact, other than damage resulting from a hit and run crash.

B. Crashes investigated by state college, university or community college police departments or by the Capitol Police will be reported to the Department of State Police as follows:

1. Within five (5) days of the crash, two (2) copies of Form FR-300 (police) and two (2) copies of Form SP-209 will be forwarded to the Safety Division of the Department of State Police to report the facts of the crash. Only two (2) copies of the SP-209 need be submitted for crashes not reportable to DMV. The investigating officer's opinion as to the negligence of all persons involved based on his/her investigative findings will be included.

   a. When required by statute, the original Form FR-300 (police) should be forwarded directly to the Department of Motor Vehicles. The SP-209 is not to be forwarded to DMV.

2. When drivers of state-owned vehicles are injured, the nearest State Police Division Headquarters should be notified as soon as possible, giving the name of the injured person and the department by whom he is employed. If hospitalized, the name and location of the hospital should also be provided.

C. Whenever a traffic crash involving a state-owned vehicle occurs in another state or in the District of Columbia, the operator shall report the crash to the State Police, Highway Patrol, or local police department having jurisdiction. The operator of the state-owned vehicle shall obtain information from the investigating officer as to how to obtain a copy of the accident report and the name, address and policy number of insurers of other involved vehicles.
Such information shall be provided to the operator's immediate supervisor upon return to the state. The operator shall obtain copies of the accident report and forward such report through his/her immediate supervisor to the Department of State Police.

D. All traffic crashes involving state-owned vehicles not required to be reported to the Department of State Police or police department of any state college, university or community college or to the Capitol Police within their area of responsibility, shall be reported to the involved operator's supervisor immediately.

E. Failure to make reports as required by paragraphs A through D of this directive shall be handled by the agency employing the operator in accordance with the Standards of Conduct.

II. REPAIR OF CRASH DAMAGE

A. In the case of a traffic crash involving the use of a state-owned pool vehicle, the Department of General Services, Office of Fleet Management Services, shall repair the damage to the vehicle, and where there is no contributory negligence on the part of the operator, shall bear the cost of such repairs. Where it has been determined that there is contributory negligence on the part of the operator or origin of the damage is undetermined, the department or agency using the vehicle will bear the cost of repairing the same.

B. In those cases where it has been determined that the cause of a crash involving a state-owned motor vehicle was due to either negligence or gross negligence on the part of the state operator, at the discretion of the agency head, appropriate charges may be placed against the employee under the Standards of Conduct.

C. When a state-owned motor vehicle has been damaged through gross negligence on the part of the state operator, the head of the agency owning or using the vehicle shall require the state operator to pay the first $100.00 of the cost of damage repair to the state-owned vehicle.

D. In situations involving the unauthorized use of a state-owned motor vehicle, the agency head may require the operator of the state-owned motor vehicle to pay the entire cost of repairing any damage which the vehicle might have sustained.

III. AGENCY CONTROL OF USE OF STATE OWNED VEHICLES

A control shall be established by each agency as to which employees may not have the privileges of using state-owned motor vehicles. Based on conditions reported by
the Department of State Police or police department of any state college, university or community college or the Capitol Police subsequent to the investigation of an accident, upon the records of the Department of Motor Vehicles or upon recommendations made by the Uniform Accident Prevention Review Committee if the state vehicle involved was owned by the Department of General Services, Office of Fleet Management Services, the right of an employee to operate a state-owned motor vehicle may be suspended.

IV. INTRA-AGENCY ACCIDENT PREVENTION AND SAFETY PROGRAMS

Each Agency of state government which owns its own motor vehicles shall establish an Intra-Agency Accident Prevention and Safety Program which shall include the following:

A. RECORDS

A records system shall be established on each individual crash. Such record shall include as a minimum the date of the crash, the location of the crash, vehicle number, the operator's name, the name of the other party or parties involved, a factual description of the crash, the type of crash, amount of damage, a description of any other vehicle or vehicles involved and the name of their insurance carrier. The record should also reflect the name of the individual investigating the crash and the classification assigned to the crash after its evaluation.

1. An additional records system shall be established to include the name of each agency employee who is qualified to operate a state-owned motor vehicle. This record shall include any crash involvement while operating both agency-owned vehicles and vehicles owned by the Department of General Services, Office of Fleet Management Services. It shall reflect the date of each crash in which an individual driver is involved and the final classification assigned to the crash after its evaluation.

2. The Department of State Police shall have access to the records at all reasonable times.

B. REVIEW COMMITTEE

An Accident Review Committee shall be established in each agency. Such Committee shall be comprised of at least three (3) people and shall meet periodically in order to evaluate each crash in which an agency-owned vehicle is involved.
After thoroughly reviewing all of the material concerning each crash, the Review Committee shall evaluate each crash as Preventable, Not Preventable, or Incident based upon the following criteria:

1. It shall be considered a Preventable crash when the operator of the state-owned vehicle is found to have been guilty of contributory negligence.

2. The crash shall be considered Not Preventable when it has been determined that the operator of the state-owned vehicle did not contribute to the crash.

3. A crash resulting from natural forces, from acts by other than human, from a deliberate act, from a non-perceivable object, or while the vehicle is properly parked, shall be classified as an incident and not considered as crashes in the safety program.

After a crash is evaluated and classified by the Review Committee, it shall then be reviewed by the agency head or his designated representative. The agency head or his designated representative shall then advise the employee of the findings and of any other action which might be taken against the employee under the provisions of the Standards of Conduct.

C. SAFE DRIVING AWARDS

It is recommended that each agency have an Awards Program to recognize employees for safe driving.

D. REPORTING

At the end of each fiscal year, each agency shall forward a report on the operation of its agency-owned vehicles to the Department of State Police, 491 Southlake Blvd., Richmond, Virginia 23236 - attention: Safety Officer, reflecting the following information:

1. Number of miles which agency-owned vehicles traveled during fiscal year.

2. Total number of crashes in which agency-owned vehicles were involved.

3. A breakdown of the total crashes into the three (3) classifications:

   (a) Preventable
   (b) Not Preventable
   (c) Incident
The agency's crash frequency will be calculated by the Department of State Police based upon the number of Preventable crashes per 100,000 miles of travel. (Incidents will not be included for the purpose of calculating an agency's crash frequency).

**Reports required by this section shall be forwarded to the Department of State Police by September 1 of each year.**

**V. DEPARTMENT OF GENERAL SERVICES, OFFICE OF FLEET MANAGEMENT SERVICES, POOL VEHICLES**

A. The Uniform Accident Prevention Committee which is currently made up of representatives from twelve (12) state agencies will continue to meet monthly in order to review all crashes involving vehicles owned by the Department of General Services, Office of Fleet Management Services.

B. After a crash is reviewed and classified by the Review Committee, the Committee Secretary shall forward a letter to the state operator's agency head or his designated representative setting forth the classification of the crash and the reason or reasons which the committee based its decision. This letter shall then be discussed with the employee who shall be required to sign the bottom of the letter indicating that it was discussed. A copy of the letter bearing the employee's signature shall then be returned to the Committee Secretary and made a part of the crash file.

C. In addition to this action, if circumstances of the crash so warrant, the agency head may cause further action to be taken against the employee in keeping with the Standards of Conduct for state employees.

D. A Car Pool Regulations Manual issued by the Office of Fleet Management Services relating to vehicle accidents shall be issued to each pool car.

**VI. REVIEW OF ACCIDENT CLASSIFICATION**

A. If a question as to the classification of the crash is in dispute between the operator and the agency or the Department of Transportation in the case of pool vehicles, the matter may be referred to the Department of State Police by the agency for a full review of the case. The Department of State Police will review the facts of the case and shall provide a report of its recommendations to the agency or agencies involved and to the operator of the vehicle. Appropriate action to comply with the recommendations of the Department of State Police shall be taken by the agency or agencies.
VII. ANNUAL AWARDS

A. DEPARTMENT OF GENERAL SERVICES, OFFICE OF FLEET MANAGEMENT SERVICES, POOL VEHICLES

Four annual safe driving awards will be made to agencies operating Office of Fleet Management Services Pool Vehicles with the highest number of miles driven per preventable crash in the following categories:

- Agencies traveling in excess of 1,000,000 miles
- Agencies traveling from 500,000 to 1,000,000 miles
- Agencies traveling from 100,000 to 500,000 miles
- Agencies traveling from 10,000 to 100,000 miles

B. AGENCY-OWNED VEHICLES

Four annual safe driving awards will be made to agencies operating agency-owned vehicles with the highest number of miles driven per preventable crash in the following mileage categories:

- Agencies traveling in excess of 1,000,000 miles
- Agencies traveling from 500,000 to 1,000,000 miles
- Agencies traveling from 100,000 to 500,000 miles
- Agencies traveling from 10,000 to 100,000 miles

C. PRESENTATION OF AWARDS

The Safe Driving Awards shall be presented annually during an appropriate ceremony.

WGM/mj

Attachments: State Owned Vehicle Crash Report (SP-209)
Property Responsibilities of the Capitol Police
STATE OWNED VEHICLE CRASH REPORT

Accurate description of location of crash. If on private property, give nearest road number. Example: private property off Rt. 123.

COUNTY/CITY: ____________________________

ROUTE NO.: ____________________________

INTERSECTION: ____________________________

___ mi. ___ ft. □ N □ S □ E □ W

OF ROUTE: ____________________________

DATE: _____________ TIME: _____________ □ AM □ PM

NUMBER VEHICLES INVOLVED: ____________________________

NOTIFIED:

DATE: _____________ TIME: _____________ □ AM □ PM

CONDITIONS OF:

LIGHT: ____________________________

ROAD: ____________________________

WEATHER: ____________________________

STATE VEHICLE: ED#: MAKE: TYPE: YEAR: LICENSE #:  

STATE VEHICLE DRIVER:

NAME: __________________________________________________

WEARING SEAT BELTS: □ YES □ NO □ UNKNOWN

OCCUPATION: ____________________________

DEPARTMENT: ____________________________

WORK LOCATION: ____________________________

OFFICE TELEPHONE: ____________________________

WORK ADDRESS: ____________________________

STATEMENT: __________________________________________________

________________________________________________________

COULD CRASH HAVE OCCURRED AS DESCRIBED BY DRIVER?: □ YES □ NO

OTHER VEHICLE: MAKE: TYPE: YEAR: LICENSE #:  

NAME: ____________________________ PHONE: ____________________________

ADDRESS: ____________________________

LIABILITY INSURANCE COMPANY: ____________________________ POLICY #: ____________________________

STATEMENT: __________________________________________________

________________________________________________________

WITNESS NAME: ____________________________ PHONE: ____________________________

ADDRESS: ____________________________

□ PASSENGER IN STATE VEHICLE □ OTHER VEHICLE □ OTHER: ____________________________

STATEMENT: __________________________________________________

________________________________________________________
Property Responsibilities of the Capitol Police

1. Aluminum Building: 215-217 Governor Street
2. Bell Tower: Capitol Square
3. Central Garage: 2400 West Leigh Street
4. Central Highway Building: 1221 East Broad Street
5. Consolidated Laboratory: 9 N. 14th Street
6. Seaboard Building: 1501 East Franklin Street
7. Department of Information Technology: 110 S. 7th Street
8. Broad Street Park: 9th Street at East Broad Street
9. Morson Row Houses: 219, 221 & 223 Governor Street
10. Eighth Street Office Building: 200 N. 8th Street
11. Finance Building: Capitol Square
12. General Assembly Building: 9th at East Broad Street
13. Governor's Mansion: Capitol Square
14. VDOT Annex: 1401 East Broad Street
15. Worker's Compensation Commission: 1000 DMV Drive
17. James Madison Building: 109 Governor Street
18. Thomas Jefferson Building: 1220 Bank Street
19. Storage (Old Library): 11th Street at Capitol Square
20. Lee Monument: Monument Avenue at Allen Avenue
21. Main Street Station: 1500 East Main Street
22. Va. Retirement System: 1200 East Main Street
23. John Tyler Building: 1300 East Main Street
24. Pocahontas Building: 900 East Main Street
25. Washington Building: 1100 Bank Street
26. Ninth Street Office Building: 200 N. 9th Street
27. Old City Hall: 1001 East Broad Street – exterior patrol only
28. State Capitol: Capitol Square
29. Virginia Science Museum: 2500 West Broad Street
30. Supreme Court Building: 100 N. 9th Street
31. Virginia Employment Commission: 703 East Main Street
32. Virginia War Memorial: 621 S. Belvidere Street
33. Zincke Building #8: 203 Governor Street
34. Library of Virginia: 800 East Broad Street
35. Department of Social Services: 730 East Broad Street
36. Virginia Housing Development Authority: 601 South Belvidere Street
37. Old Memorial Hospital: 1201 East Broad Street
38. Capitol Square: 9th Street at East Grace Street
39. Colgate Darden Mall: 9th Street at Capitol Square
Parking Facilities:
40. Lot #1: State Route #318 and Associated Parking
41. Lot #1A: 10th Street – 12th Street Driveway
    Commonly known as Lot 1 North
42. Lot #2: Finance Building Parking
43. Lot #3: beside the Jefferson Building
44. Lot #4: Old 14th Street at E. Grace Street
45. Lot #5: Monroe Building Deck
46. Lot #6: behind Building 8
47. Lot #7: behind Morson Row
48. Lot #8: Tyler Building Deck
49. Lot #9: NOT IN USE
50. Lot #10: Va. Science Museum
51. Lot #11: NOT IN USE
52. Lot #12: South Side – 1500 E. Main Street
53. Lot #13: Consolidated Lab
54. Lot #14: VDOT West upper lot
55. Lot #15: VDOT Center lot
56. Lot #16: VDOT East lower lot
57. Lot #17: Madison Building Deck
58. Lot #18: Supreme Court
59. Lot #19: North Alley of the 9th St. Office Building
60. Lot #20: Southwest Alley of the 8th St. Office Building
61. Lot #21: NOT IN SERVICE
62. Lot #22: 7th & Marshall Street Deck
63. Lot #23: North side 1500 E. Cary Street
64. Lot #24: Main Street Station (Partial Lot)
65. Lot #25: New Virginia Library Parking
66. East Grace Street Alley – 9th St. Office Building
67. VEC Lot: 703 East Main Street