



Nomination Information and Application

The Saved by the Belt program gives law enforcement agencies and occupant protection programs and partners the opportunity to recognize safe motorists and spread the word about the importance of seat belt use.

To recognize drivers or passengers whose seat belt use saved their lives, complete the following easy steps after the crash:

- **Fill out the nomination form** on the back of this flyer. Have the nominee complete the "Nominee Information" section. Forms are also available at michigan.gov/seatbelts.
- **Send the form** to the OHSP at the address below or email it to MSP-OHSP@michigan.gov.
- **Please send photos** (if available) and the UD-10 crash form along with the application. Information on how to order the UD-10 traffic crash report can be found at michigan.gov/crash.

The following criteria will be used to issue awards:

- The crash must be serious (more than a fender bender)
- No drugs or alcohol involved on the part of the candidate
- Seat belt must be worn properly (not coded "restraint use unknown")

Qualifying candidates will receive a certificate and small token of appreciation. The certificates can be mailed to the agency for presentation to the recipient, or the OHSP can mail them directly to the recipient. Presentations can also be made during a local Traffic Safety Network meeting.

Questions? Contact the Michigan Office of Highway Safety Planning at 517-284-3332.



P.O. Box 30634, Lansing, MI 48909 • 517-284-3332 • michigan.gov/seatbelts

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Saved by the Belt Nomination Form

NOMINATOR INFORMATION		
Nominating organization		
Contact name		
Phone		
Email		
NOMINEE INFORMATION		
Name		
Phone		
Email		
Street address		
City/State/ZIP		
Allow use of name for media purposes?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, nominee signature		
Willing to participate in formal presentation and/or media event?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
CRASH INFORMATION		
Date of crash		
Crash report number		
Number of passengers		
Location		
Investigating officer		
Vehicle Make/Model/Year		
Type of occupant protection	<input type="checkbox"/> Seat Belt	<input type="checkbox"/> Child safety seat
Briefly describe crash/injuries/damage to vehicle		
AWARD INFORMATION		
<input type="checkbox"/> Send the award items back to the agency for presentation to the recipient.		
<input type="checkbox"/> Mail the award items directly to the recipient.		
<input type="checkbox"/> Present the award items at a Traffic Safety Network meeting. (OHSP will contact nominating agency to arrange.)		