

Incident Report Form

This **incident report form** sample template provides a structured way to document workplace accidents or unusual events. It ensures all essential details are captured clearly for review and follow-up. Using this template helps improve safety protocols and accountability within any organization.

General Information

Date of Report:

Name of Person Reporting:

Contact Information:

Incident Details

Date of Incident:

Time of Incident:

Location of Incident:

Names of Individuals Involved:

Description of Incident:

Describe what happened, sequence of events, and any contributing factors.

Injuries or Damage (if any):

Witnesses:

Names and contact info of witnesses

Actions Taken

Immediate Action Taken:

Further Action Required/Recommended:

Reported To (Name & Position):

Authorization

Signature of Reporter:

Date:

Submit Report