

INCIDENT REPORT LOG

Type of Incident:

Lost Person	Lost Property	Structural collapse	Damage to property	Client complaint	Abuse of staff	Other

Name of Involved Person(s):	
Their Address and contact details:	
Date and Time of Incident:	
Location of Incident:	
Was illness or injury involved?	
Description of Incident:	

Information provided by:	
Date/Time:	
Signature:	