

# Incident Report Sample: Slip and Fall Accident

## Basic Information

Date of Incident: \_\_\_\_\_

Time of Incident: \_\_\_\_\_

Location of Incident: \_\_\_\_\_

Person Involved (Name): \_\_\_\_\_

Contact Information: \_\_\_\_\_

Witnesses (Names & Contact): \_\_\_\_\_

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## Incident Details

Describe the Incident:

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Describe the Injuries:

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Action Taken (First Aid, etc.):

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Reported to (Name/Role):

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## Signature

Reported By: \_\_\_\_\_

Date: \_\_\_\_\_