

Fire Outbreak Construction Incident Report

Date of Report

Date of Incident

Location

Enter site location

Reported By

Name & position

Incident Description

Describe what happened

Immediate Actions Taken

Describe actions taken

Injuries and Casualties

List injured personnel, if any

Property and Equipment Damage

Detail any damages

Witnesses

Name and contact information

Suspected Cause of Fire

Enter suspected cause

Preventive Measures Suggested

Preventive steps and recommendations

Supervisor/Manager Name

Full name

Signature

Sign or type name

Date