

# Fire Emergency Incident Report

## Hospitality Premises

### 1. Basic Information

Premises Name

Address

Date of Incident

Time of Incident

Reported By

Designation / Department

Contact Details

### 2. Incident Details

Location of Fire (Area/Room)

Source/Cause (if known)

Fire Alarm Activated?

Fire Detected By

How Detected (e.g., Smoke, Alarm, Smell, Visual)

Initial Actions Taken

Fire Extinguished By

Method/Equipment Used

Duration of Incident

### 3. Evacuation Details

Evacuation Initiated?

Estimated No. Evacuated

Assembly Point

Issues Encountered During Evacuation

### 4. Emergency Services

Fire Service Called?

Arrival Time

Actions Taken by Fire Service

Police/Ambulance Called?

Other Agencies Involved

## 5. Injuries, Fatalities, & Damages

**Injuries (Detail if any)**

**Fatalities (Detail if any)**

**Property Damage Description**

**Estimated Cost**

## 6. Follow-up Actions/Recommendations

## 7. Additional Notes / Observations

Report Completed By:

Name: .....

Position: .....

Date: .....

Management Review:

Name: .....

Position: .....

Date: .....