Pinal County Risk Management
Incident/ Event Report

If additional space needed; please continue on a separate sheet of paper.

Employee and Department Information

Name of employee making report:	Title:	Date:	Time:
Department:	Building Address:	Office Telephone Number:	

Incident/Event Information

Type of incident/event:		
Reported to the police? ☐ Yes ☐ No	Officer's Name:	Badge Number:
Daily Report Number:	Name of Police Agency:	Telephone Number:
Location of incident/Event:		
Full Written description of incident/event:		
Description of property damage or loss and estimated cost to repair/replace:		
Individual Involved:	Telephone Number:	Estimated Loss:
Individual's Involved Address:	City/Town:	State, Zip

Signatures

Employee Signature:	Date:	Supervisor Signature:	Date:

This form is to be used for reporting a theft, vandalism, slip and fall or other non-mechanical type incidents. DO NOT use for vehicle accidents. Fill out this form immediately following an incident and submit to Risk Management within 24 hours. Report the incident/event to your supervisor. For assistance call Risk Management 520-866-6236.

Complete form within 24 hours and submit to Risk Management
RiskMgmt@pinalcountyaz.gov Phone: 520-866-6236 Fax: 520-866-6477