

Workplace Property Damage Report

Date of Report

Time of Report

Location of Incident

Reported By

Department

Description of Property Damaged

Incident Details

Extent of Damage

Immediate Action Taken

Witnesses (if any)

Reported To

Reviewed By

Reporter's Signature & Date

Supervisor/Manager's Signature & Date

Important Notes:

- Complete this report as soon as possible following the incident.
- Provide precise and factual information; avoid assumptions.

- Attach photographs and supporting documents if available.
- This report helps initiate investigation and insurance processes.
- Keep a copy of this report for your records.