



Incident #

Use this form to report all non-vehicle and non-laboratory related incidents that result in property damage or injury. Related documentation should be listed in the form and submitted as attachments. Submit the form to ehs@csudh.edu.

Date & Time of Incide	nt:	Location of Incident:
Inju	ured Person (if applicable)	Witnesses (use additional sheet if necessary)
Name:		Name:
Address:		Address:
Phone:		Phone:
Email:		Email:
List other documents	attached:	
Completed by:	Signature	e: Date:
Phone:	Email:	
Describe incident in d	etail, including witness statements:	
Corrective Actions Re	ecommended :	
Action(s) implements	ed. (This section is to be completed by the	he Environmental Health & Safety department only)