

To be completed by person involved in the incident **Rev. 06/2024**

<https://fabswprogram.fillout.com/incform>

Instructions: if you are involved in an accident or incident involving company equipment, including vehicles, you must complete this report as soon as possible but no later than 24 hours after the incident. Fully completed reports and supporting documents, such as pictures and police report information, must be submitted to your supervisor. The department head and human resources review all incidents.



ANSWER EVERY QUESTION ON THIS REPORT before submitting to your supervisor.

1. Name & Position:	2. Check One: [] Employee [] Temporary [] Contractor [] Visitor
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3. Date of Incident:	Circle Day of Incident- Sun Mon Tue Wed Thu Fri Sat
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4. Time of Incident:	5. Date and Method you Reported Incident:	6. Supervisor reported to:
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7. Describe in detail WHAT & HOW this happened (use back to draw diagram or if more space is needed).

8. Truck/Vehicle and VIN # (if none, check here <input type="checkbox"/>) Can take picture of registration	Trailer # & VIN #
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9. Police Dept:	Attach copy of police report or any information obtained.
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10. Include the pictures that you took (you are required to take pictures of the incident.) email pictures to your supervisor and hr4u@fabianobrothers.com. Or UPLOAD HERE:

11. WHERE did this incident happen?

12. WHY did this incident happen?

13. Were there any injuries to you or any involved party? If Yes, explain. () YES () NO

14. List any vehicle passengers or witnesses to the incident (if none, write none)?

15. How could this incident have been avoided? What action or behavior of yours contributed to this incident?

2-SIDED FORM, COMPLETE BACK.

More information regarding incident on: _____ involved person: _____

WERE THE POLICE INVOLVED? YES (PROVIDE COPY OF TICKET OR ANY INFORMATION THEY GAVE YOU)

NO (Police not called)

UPLOAD INFORMATION SUCH AS POLICE REPORT OR PICTURES-

Diagram of Incident:

DRAW A DIAGRAM OF THE INCIDENT. YOU CAN TAKE A PICTURE OF THE DIAGRAM AFTER COMPLETING IT AND EMAIL TO HR4U@FABIANOBROTHERS.COM. IT WILL BE MATCHED UP TO THIS INCIDENT REPORT.

Management reviews and approves Incident Reports. If you don't complete the report correctly, it will be returned to you to correct or recomplete it.

16. Employee* Signature and Date: _____

After HR Review, proper disciplinary action will be taken (if applicable). If this accident/incident resulted in a Near Miss (as determined by department head) no disciplinary action will be taken.