

1. Incident Date:

2. Involved person:

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

3. Time of Incident:

**4. Date, Time, & Method
you were notified of Incident:**



Instructions for Supervisor- Once notified of an incident (not an injury), initiate this report with the employee as soon as possible, but no later than 24 hours after notification. Speak to the involved employee to complete this report. The employee must complete the “Incident Report Form” BEFORE the supervisor report is completed. Submit both the employee incident report and supervisor incident report to HR within 48 hours of discovering the incident. Note: **Only include facts about the incident.**

5. Describe the incident that took place according to the employee. Include WHAT, WHEN, WHERE, and HOW the incident happened. Be sure to include the company vehicle number, truck number, and trailer number if applicable, or submit a picture of the registration card.

Check if continued on back ()

6. How could this incident have been prevented?

7. WHY did this incident happen?

8. Incident resulted in (check all that apply):
☐ Property Damage (Client or Fabiano) ☐ Vehicle Damage
☐ Inventory Damage ☐ Technology Damage

9. What is the estimated amount of damage repair?

10. Was there a police report completed: ☐ YES (list which police) _____ ☐ NO

11. Pictures are required. Include them with this report and email to your supervisor and hr4u@fabianobrothers.com.

12. Supervisor Comments: [] Incident was a Near Miss OR not caused by employee
 (subject to approval by department head and HR)
 [] Incident was caused by employee above. Discipline will be determined
 by the department head and the HR Director within 48 hours.

13. Supervisor Signature and Date submitted to HR: _____

More information regarding incident on: _____ **Involved Employee:** _____

Diagram of Incident:

