

Call for Help

Keep the following phone numbers readily available on market days. They should be added to the incident report form before printing or sharing copies to use on market days.

Emergency: 911

Local Law Enforcement: _____

Market Manager Cell: _____

Poison Control: _____

Market Security: _____

Market Insurance Provider: _____

Market Information

Market name & location:

Person completing incident report:

Name: _____

Telephone: _____

Email: _____

Market day(s) & hours:

Contact Information for People Involved:

Injured party

Witnesses:

Name: _____

Name: _____

Telephone: _____

Telephone: _____

Address: _____

Address: _____

Witnesses:

Witnesses:

Name: _____

Name: _____

Telephone: _____

Telephone: _____

Address: _____

Address: _____

Incident Details

Date & time: _____

Incident location: _____

Pictures taken? Y / N

Describe area if needed: _____

Emergency responders contacted:

- 911
- Fire department
- Police
- Emergency contacts
- Market personnel
- Insurance company
- Landlord
- Other: _____

Description of incident & injuries:

For descriptions from witnesses, note which witness made the statement and indicate when when using direct quotations.

Market personnel involved: _____

Action taken by market personnel: _____

Medical attention requested and/or provided: _____

Property damage: _____

