

**System Office of Risk Services
Servicing Statewide & Fairbanks**

910 Yukon Drive, Suite 106
P.O. Box 755240
Fairbanks, AK 99775-5240
Phone (907) 450-8150
Fax (907) 450-8177

<http://www.alaska.edu/risksafety/>
<http://www.uaf.edu/safety/>



**UNIVERSITY
of ALASKA**

Many Traditions One Alaska

**System Office of Risk Services
Servicing Anchorage & Southeast**

1815 Bragaw Street
Suite 206
Anchorage, AK 99508
Phone (907) 786-1140
Fax (907) 786-1412

<http://www.uaa.alaska.edu/ehsrms/>
http://www.uas.alaska.edu/facilities_services/safety

INCIDENT REPORT

Print and complete this form to report an incident resulting in potential bodily injury, property damage, and/or loss or theft of University property. * **Send the completed form within 48 hours of the incident to Campus Risk Services either by Email, facsimile, Campus or U.S. Mail.** Do NOT use this form to report auto or employee injury related incidents. Please contact your campus Risk Services representative if you have questions.

Name (Last) _____ (First) _____ (MI) _____

Address _____

City _____ State _____ Zip Code _____

Employee/Department Name: _____ Student Visitor Other _____

Work Phone _____ Home Phone _____ Email _____

Date of Incident _____ Time of Incident _____

Location _____

Describe Incident

Was anyone injured or anything damaged? If yes, please describe

Witnesses (Include name, address, phone and relationship)

Did police, security, fire or other emergency agencies respond? If yes, please explain.

Other Comments

Your Signature _____ Date _____