

CITY OF WINCHESTER, VIRGINIA



Administration Department
15 North Cameron Street
Winchester, VA 22601
540-667-1815
TDD 540-722-0782
Fax 540-722-3618

PROPERTY DAMAGE INCIDENT REPORT FORM

FOR PROPERTY INSURANCE PURPOSES ONLY

Do Not Use this Form to Report Vehicle Accidents or Worker's Compensation Injuries.

Dear Supervisor:

In an effort to thoroughly collect City property damage information, your time and effort is necessary to document all property damages, i.e. broken windows, stolen property, etc.

Thank you for your assistance.

CITY PROPERTY INCIDENT INFORMATION:		
Date of Incident:	Time of Incident:	Department:
Employee(s) Reporting:	Location of Property:	Serial/Model Numbers:
Estimated Dollar Amount of Damage: \$		
Description of City Property Damaged/Stolen: (Use the back of this report to draw a diagram or provide more information of the incident):		

AUTHORITIES CONTACTED: Police Fire Rescue Other
(Attach report if available.)

CONDITIONS: Fire Wind Snow Rain Flood
(Check all that apply) Vandalism Theft Other:

***THIS FORM SHOULD BE COMPLETED AND RETURNED TO RISK MANAGER,
ADMINISTRATION DEPARTMENT WITHIN 24 HOURS OF INCIDENT.***