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**Security Incident Report Form**

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| --- |
| **INCIDENT DETAILS** |
| Date and time of the incident | **:** |  |
| Location of the incident | **:** |  |
|  |  |  |
| Describe the incident | **:** |  |
|  |  |  |
|  |  |  |
| Details of the witnesses, if any | **:** |  |
|  |  |  |

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| **INCIDENT CATEGORY** |
| Select the appropriate category for the security incident: |
|  |  |
| [ ]  | Unauthorized Access |
| [ ]  | Theft or Burglary |
| [ ]  | Vandalism |
| [ ]  | Assault or Threat |
| [ ]  | Harassment |
| [ ]  | Cybersecurity Breach |
| [ ]  | Other (specify**) :** |  |

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| **DESCRIPTION OF THE INCIDENT** |
| Provide a detailed description of the incident, including any relevant information about the individuals involved, actions taken, and any contributing factors | **:** |  |
|  |  |

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| **IMMEDIATE ACTIONS TAKEN** |
| Describe the immediate actions taken to address the incident, ensure the safety of individuals, and secure the affected area if applicable | **:** |  |
|  |  |

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| **REPORTING TO AUTHORITIES** |
| Specify whether the incident has been reported to the appropriate security authorities or law enforcement | **:** | [ ]  YES [ ]  NO  |
|  |  |
| If yes, provide details of the report and any case/reference numbers | **:** |  |
|  |  |

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| **PREVENTIVE MEASURES** |
| What preventive measures can be implemented to avoid similar incidents in the future? | **:** |  |
|  |  |

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| **ADDITIONAL COMMENTS** |
| Is there any additional information or comments you would like to include? | **:** |  |
|  |  |

|  |
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| **REPORT FILTER** |
| Name | **:** |  |
| Job Title / Role | **:** |  |
| Contact Details | **:** |  |

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