

Community Incident Notification Form

SECTION A – DETAILS OF INCIDENT (Please add information as required)

Reported by:		Report Date:		Incident Date:		Incident Time:	
Address:		Phone:		Email:			
Witness 1 Name:		Phone:		Address:			
Witness 2 Name:		Phone:		Address:			
Did an Injury Occur?	YES <input type="checkbox"/>	NO <input type="checkbox"/>					

What happened? (Provide details of the injury, loss or damage to equipment or property)

Where did it happen? (Provide Incident location)

How or why did it happen? (Provide details of why the incident happened – If unknown leave blank)

Immediate actions taken:

Did Police attend? YES NO **Event No.**

SECTION B – DETAILS OF INJURY (Please add information as required)

Injured person name:		Gender:	MALE <input type="checkbox"/>	FEMALE <input type="checkbox"/>
Injured person address:		Phone:		
Injured person was:	A volunteer <input type="checkbox"/>	A member of the public (bystander) <input type="checkbox"/>	Other or Unknown <input type="checkbox"/>	
Treatment Provided:	Ambulance <input type="checkbox"/>	Medical Treatment <input type="checkbox"/>	Hospital <input type="checkbox"/>	First Aid <input type="checkbox"/> Nil <input type="checkbox"/>

INCIDENTS MUST BE NOTIFIED TO COUNCIL AS SOON AS POSSIBLE

Please send completed forms to:

- Email: mail@wsc.nsw.gov.au or
- Postal Address: PO Box 141, MOSS VALE NSW 2577

For more information regarding this process please contact:

- Council's Environment Officer – Bushcare & Citizen Science on 4868 0772 / 0428 286 467