Premises Incident Report

Use this form to get the facts down while they're fresh, so the matter can be handled fairly and quickly. You can file it even if no one was hurt or no claim is expected, and submitting it is not an admission of fault. Questions? Reach out to your broker — they'll guide you through every step.

ABOUT THE PROPERTY

Association / property name

Policy number

Person completing this report (name & role)

Phone / email

WHAT HAPPENED

Date of incident

Time

Exact location on premises

Date / time incident was discovered

Date / time first reported internally (and to whom)

What happened? (how, what the person was doing, conditions — surface, lighting, weather)

WHO WAS INVOLVED

Person involved (name)

Their phone / email / address

Nature of injury (if any)

Was medical aid offered or sought?

Witness names & contact information

WHAT WAS CAPTURED & DONE

☐ Photos taken ☐ Video / CCTV saved ☐ Area made safe ☐ Notes / statements

Remedial action taken (what was done to make the area safe or prevent further damage)

Date reported to Arden

Reported by