



County of Sonoma
Human Resources – Risk Management
575 Administration Dr Ste 116C
Santa Rosa CA 95403



INCIDENT REPORT

Use this form to report injuries and/or property damage sustained by a third party (non-employee). If your department has its own incident report form, you may use that instead of this form.

Send report to Risk Management at liability@sonoma-county.org or fax to 707-565-6192. Keep a copy for your records.

Form section with three columns: Date of Incident, Time of Incident, Address and/or Description of Incident Location

Description of Incident

Nature and Extent of Injury or Property Damage

Injured Party Name and Contact Information, Names of Involved Employees and Department/Division

Name of Reporting Employee, Date, Department/Division, Phone Number