

Bremen Parks & Recreation Department Incident Report



Promoting Healthy & Enriching Lifestyles

Date of Incident: _____ Time: _____ a.m. ___ p.m. ___

Exact Location of Incident: _____

Description of Incident: _____

Person or Persons Involved:

Name: _____
Address: _____
Phone #: _____

Police Report Filed? (circle one) Yes No

Were Police Called? (circle one) Yes No

If Yes, What Action was taken by Police? _____

Witness (other than employee):

Name: _____
Address: _____
Phone #: _____

Name: _____
Address: _____
Phone #: _____

Employee Witness(es): _____

Employee Filing Report: _____

Date Report was filled out: _____

Deliver to Administrative Office immediately. Call the Department Director for additional instructions 770-537-4222.