Incident Reporting Form

*Complete this form with the information that is available or becomes available*

|  |  |
| --- | --- |
| Incident Description –  Personal  Property | Incident # |
| Date and time of the incident |
| Location and relationship to the TrailLegal description and ownership of property on which incident occurred (if known) |
| Person(s) involved in the incident: *(attach additional sheet if necessary)*NameAddressTelephone #AgeOccupationMedical Condition of the Injured party (if any)Property Damage (if any) |
| Witness(es): *(attach additional sheet if necessary)*Name(s)Address(es)Telephone #(s) |
| BTC activity ( ) Yes ( ) No Other organized activity ( ) Yes ( ) No Specify:  |
| Purpose for using or accessing the trail / property |
| Weather conditions at the time of the incident |
| General circumstances of incident |
| Any previous accidents/incidents in general area |
| Warning or other signage in the area |
| Information about the circumstances from police and/or other agencies *(Attach reports as they become available)* |
| Other comments |
| Names of persons providing information for this report |
| BTC contact person regarding incident  |