

# Emergency Response Team Incident Report

Date: \_\_\_\_\_

Time of Incident: \_\_\_\_\_

Location: \_\_\_\_\_

## Incident Details

Description of Incident: \_\_\_\_\_

Response Team Members Involved: \_\_\_\_\_

## Actions Taken

Summary of Actions: \_\_\_\_\_

Additional Resources Deployed: \_\_\_\_\_

## Outcomes

Results of Incident Response: \_\_\_\_\_

Follow-up Actions Required: \_\_\_\_\_

## Report Prepared By

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Signature: \_\_\_\_\_

## Review and Approval

Reviewed By: \_\_\_\_\_

Date of Review: \_\_\_\_\_