



**1. Person Reporting Details**

Full Name:

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Contact Number:

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Address:

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Email Address:

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**2. Incident Details**

Location of Incident:

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Exact Place/Area:

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Date of Incident:

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Time of Incident:

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**3. Person/s Involved:** Use additional pages if necessary.

**Full Name:**

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**Contact Number:**

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**Injury Sustained (If any):** Use additional pages if necessary

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**4. Witnesses:** Please provide details of any witnesses to the incident. Use additional pages if necessary.

**Full Name:**

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**Contact Number:**

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**Statement Summary:**

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**5. Description of Incident:**

Provide a detailed description of the incident including events leading up to it, what happened, and any actions taken immediately after. Use additional pages if necessary.

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**6. Immediate Actions Taken**

Describe any immediate remedial or emergency actions taken following the incident.

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**7. Injury Details:** If an injury occurred, provide details below.

Nature of Injury:

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Part(s) of Body Injured:

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Medical Treatment Provided:

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Was medical treatment required beyond first aid? (Yes/No): \_\_\_\_\_

If yes, specify treatment details and provider:

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**8. Reporting and Notifications:** List the person/s notified of the incident

Date Notified:

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Person/Representative Notified and contact details:

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**9. Declaration**

Reporter Declaration:

I declare that the information contained in this report is true and accurate to the best of my knowledge.

I understand that providing false information may result in disciplinary action or legal consequences.

Full name: \_\_\_\_\_

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

Contact Number: \_\_\_\_\_

Upon completion of this form, please email as soon as possible to [insurance@dogsvictoria.org.au](mailto:insurance@dogsvictoria.org.au)

**Note:**

This Incident Report Form complies with applicable Australian laws and regulations. It must be completed promptly following an incident and submitted to the relevant authority within the organisation. Confidentiality of personal and sensitive information will be maintained in accordance with privacy legislation.



**DOGS**

VICTORIA

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# PERSONAL INCIDENT INJURY REPORT FORM