**Damage to Property or Equipment Form**

For use when any company vehicle, equipment, or asset is vandalised, damaged, or tampered with.

|  |  |
| --- | --- |
| Date of Report (DD/MM/YYYY) |  |
| Time of Report (24:00)  |  |
|  |  |
| Reported by (name & role)  |  |
| Date and Time of Damage Noticed |  |
| Location/Worksite   |  |
| Type of Asset Damaged (vehicle, tool, IT equipment etc)  |  |
| Asset ID or Registration Number (if applicable)   |  |
| Nature of Damage (e.g. graffiti, broken part, missing item)  |  |
| Suspected Cause or Assailant (if known)  |  |

**Evidence**

Photos Taken? YES ☐ NO ☐

CCTV Requested? YES ☐ NO ☐

Police Notified? YES ☐ NO ☐

Crime Ref Number (if applicable) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Action Taken (Tick if completed)

☐ Asset isolated or made safe

☐ Damage reported to maintenance or facilities

☐ Supervisor/Manager informed

☐ Replacement equipment sourced

☐ Internal report completed

☐ Health and safety log updated