

Attention Mac users: If you have opened this form in something other than Adobe Acrobat or Adobe Reader, the form will not work. Please close the viewer and re-open the form in either Acrobat or Reader. Thank you!

University of California, San Francisco
PROPERTY DAMAGE INCIDENT REPORT

Use this form to collect and document information and details of the property damage incident. Departments MUST report ALL incidents regardless of the extent of damage to the property within 24-hours to UCSF Risk Management and Insurance Services (RMIS).

SECTION I: INCIDENT INFORMATION

Date Incident Occurred: _____ Time: _____ Date Reported to UCSF: _____

Your Name: _____ Phone: _____

Department: _____ Job Title: _____

Describe the Incident in Detail:

Location of Incident: _____

Police Authority Notified Yes No Police Dept./Report#: _____

SECTION II: PROPERTY INFORMATION

Property Description/ID: _____

Property #: _____ Serial#: _____

Estimated Value \$: _____

SECTION III: REQUEST FOR FUNDING

Action Requested: REPAIR REPLACEMENT

Estimated Cost \$: _____

Department Name: _____

Fund: _____ DPA: _____

Additional Comments: _____

Prepared by: _____ Approved by *: _____

*Signature certifies property has been verified for coverage under the Property Program

Attach PHOTOS (if available), Additional information, etc. to this report
Keep a copy of this form for your records, and advise your Supervisor/Department of the incident.
Form RM 3-2010 Prop