## **INCIDENT REPORT**

Note: Please do <u>not</u> use this form for employee injuries or work-related illnesses. Use State of Indiana form 34401, First Report of Employee Injury Illness.

All incidents must be reported to Gallagher Bassett Services, 5775 Nimtz Parkway, Suite 100, South Bend, Indiana 46628, on this form. An <u>incident</u> is any accident, occurrence, or situation causing injury which <u>may</u> result in a possible claim against your location or the Archdiocese of Indianapolis. <u>Incidents</u> can be mailed to the address above or faxed to 855-802-0077.

When you are virtually <u>certain</u> that there will be a <u>claim</u> made against the Archdiocese, call it in immediately to 574-344-2923, 800-762-9839. <u>Incidents</u> are usually minor, <u>claims</u> are more serious and need specialized handling.

SCHOOL OR PARISH NAME	ADDRESS		TODAY'S DATE
DATE OF INCIDENT	TIME OF INCIDENT	LOCATION OF INCIDENT	
DATE OF INCIDENT		LOCATION OF INCIDENT	
ANY VEHICLES INVOLVED? IF YES, GIVE DESCRIPTIONS, SERIAL NO.			
NAME(S),ADDRESS(ES),AND AGE(S) OF PERSON(S) ALLEGING INJURY OR DAMAGES			
PLEASE CIRCLE ONE (STUDENT) (VOLUNTEER) (OTHER-EXPLAIN)			
PHONE NUMBERS (INCLUDE PARENT'S NAMES AND PHONE IF INJURED PERSON IS A STUDENT)			
NARRATIVE (DESCRIPTION OF INCIDENT, TYPE OF INJURY, OR TYPE OF PROPERTY DAMAGE			
SIGNATURE OF 'PERSON SUBMITTI	NG THIS REPORT	PHONE #	
DO YOU WANT STUDENT ACCIDENT CLAIM FORMS SENT? (YES ,NO)			

It is not necessary to type this form. Please keep a copy for your records and mail or fax the Original to:

Gallagher Bassett Services, Inc.

5775 Nimtz Parkway, Suite 100

South Bend, IN 46628

Fax 855-802-0077

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