Primeline
Philippines Incorporated

INCIDENT REPORT

Employee Name	:		
Employee No.	:		
Department	:		
Date of Incident	:	**Time of Incident:**	
Place of Incident	:		
Category	☐ **Information**	☐ **Possible Violation**	

Details of the Incident

Note: If more space is needed, please use any clean sheet of paper and attach herewith. This notice must be submitted to HRD within 48 hours from the time the incident was committed or discovered.

Reported by:	Reviewed by:	Noted by:	Received by:
Signature over Printed Name/ Date	Immediate Superior	Department Manager	HRD- Date/Time