

## Report of Loss or Damage to District Property

***If an incident occurs in which damage to property or personal injury is involved, please immediately notify the District Office. Complete this report in its entirety and send to the district office within two days of the incident. District office staff will report to the district's insurance company if appropriate.***

Name of School \_\_\_\_\_ Report Date: \_\_\_\_\_  
≤ Original or ≤ Amended

Nature of Occurrence: Check all that apply:  
≤ Fire    ≤ Vandalism    ≤ Break-in    ≤ Theft    ≤ \_\_\_\_\_  
If other: Describe

Date of Occurrence and probable time \_\_\_\_\_

Date & time discovered \_\_\_\_\_ by \_\_\_\_\_

Rooms or areas involved \_\_\_\_\_

Was anyone injured? ≤ NO    ≤ YES-**CONTACT THE DISTRICT OFFICE IMMEDIATELY**

Briefly describe occurrence/damage \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Authority Notified:        ≤ Fire Dept    ≤ Sheriff's Dept    ≤ Clearlake Police

Date & Time Notified: \_\_\_\_\_

Name of Investigating Officer \_\_\_\_\_ Report # \_\_\_\_\_

Other agency(ies) involved: (PG&E, etc) \_\_\_\_\_

District Maintenance Staff involved in clean up or repair? \_\_\_\_\_

Were any items stolen, destroyed or damaged? ≤ NO    ≤ Yes: **see directions below**

**Site Administrator's Signature** \_\_\_\_\_

### ***DIRECTIONS:***

If any items are stolen, destroyed or damaged please list them on the back of this report form. Use additional sheets if necessary. The items must also be contained in the Sheriff's or Police Department report in order to be replaced through the district's insurance. (You may give them a copy of this report) If you discover that additional items were stolen, destroyed or damaged after the initial report is filed, please file an amended report with the proper authority and send a copy of the amended report to the district office. Purchase order requisitions for replacement items must be filed with the district office within 60 days of the date of the occurrence.

**Items stolen, destroyed or damaged**

<b>Name of School:</b>						<b>Occurrence Date:</b>			
Description	Serial Number	District ID Number	Stolen	Destroyed	Damaged	Repair or Replace?	Original Cost	Repair or Replacement Cost	PO Request attached for repair or replacement? If YES, note vendor.
<i>Example: 25" TV</i>	<i>556SNAG</i>	<i>#31-192</i>	<i>X</i>			<i>Replace</i>	<i>\$250</i>	<i>\$195</i>	<i>Yes: Wal-Mart</i>

For District Use:

Reviewed and approved by Site Administrator \_\_\_\_\_  
Signature
Date