



CITY OF
SOUTH LAKE TAHOE

CITY OR CITIZEN PROPERTY DAMAGE REPORT

(other than vehicle accident)

Instructions: Complete immediately and submit to Risk Management within **24 hours**.
Hand deliver OR email to rpenado@cityofslt.us OR fax to 530.542.6173.

Accident/Incident Information

Police Report Number: _____

Accident **Date:** _____ **Time:** _____ am. pm. **What was damaged?:** _____

Name of Person(s) involved: _____

Witness(es) include name, address, phone: _____

Accident Location: _____

Report prepared by
(print): _____

Accident/Incident Description

Describe in detail what happened. Use additional sheets if necessary.

Supervisor's Comments:



Employee Signature

Date
