Burlington Township
Fire Department
4548 Madison St
Clifford, MI 48727
Chief Jim Rye
810-614-7678
btfdst15@yahoo.com

Burlington Township Fire Department Incident Reporting Form

Incident Type

Type of incident? (All that apply)	Vehicle Crash ☐	Damage to Property/Equipment ☐	Injury ☐	Lost Equipment ☐	Near Miss ☐

Your Information

Full Name: _____
Last *First* *M.I.*

Signature: _____ Date: _____

Information about the Incident

Date: _____ Time: _____ Location: _____

Name(s) of Department Personnel: _____

Description (Details of incident including equipment involved / utilize witness form if additional space is needed):

_____

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_____

Department Action

Investigation:

Recommendation? Re-Training ☐ Discipline Review ☐ No Further Action ☐ Other ☐

Fire Officer: Date:
Print Sign

Decision? Re-Training ☐ Discipline Review ☐ No Further Action ☐ Other ☐

Comments:

BTFD Chief: Date:
Print Sign

Disposition:

Burlington Township Fire Department Incident Reporting Form
Witness Form

Your Information

Full Name: _____
Last *First* *M.I.*

Signature: _____ Date: _____

Information about the Incident

Description (Pertinent details of the incident including equipment involved):

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