

MOA of Wake Forest University
Collections Incident Report

This form should be used to document any incident involving damage to the collection

Date of incident _____ Approximate time of incident _____

ARTIFACT DAMAGE:

OBJECT NAME	OBJECT NUMBER	LOCATION	DAMAGE

GENERAL STRUCTURE DAMAGE (FLOORS, WALLS, ETC.)

ITEM	DESCRIPTION OF DAMAGE

Description of Incident:

What steps have been taken to resolve the situation?

What kind of environmental issues may have played a role in the incident? (wind, humidity, etc.)

Who was first to respond: _____

Was emergency personnel contacted? _____

PEOPLE INVOLVED AND WITNESSES:

NAME:					
ADDRESS:					
CITY:		STATE:		ZIP:	
PHONE:		CELL PHONE:			
EMAIL ADDRESS:					
INSURANCE:					

Employee
 Volunteer
 Visitor
 Other _____

NAME:					
ADDRESS:					
CITY:		STATE:		ZIP:	
PHONE:		CELL PHONE:			
EMAIL ADDRESS:					
INSURANCE:					

Employee
 Volunteer
 Visitor
 Other _____

Additional Questions:

Is there photographic evidence of the incident? Where can it be located?

Was the security alarm system triggered during the incident? If not, should it have been?

Was there a disaster plan? Had there been any disaster training in the 12 months prior to the incident? Was the disaster plan used? How effective was the current disaster plan and what changes could improve the plan?
