

GENERAL LIABILITY REPORT (Notice of Occurrence)

Franklin Central SU
P: 802.524.2600
F: 802.524.1540

School
Section

Reporting Location:

Bellows Free Academy UHS #48	FCSU Central Office
Northwest Technical Center	Fairfield Center School
St. Albans City School	St. Albans Town Educational Ctr

Occurrence:

Date of Occurrence: ____/____/____	Exact Location of Occurrence:
Approx Time of Occurrence: ____ : ____ AM PM	Description of Occurrence:
Authority Contacted:	

Injured:

Name:	Describe Injury:
Address and Phone:	
Medical Attention:	

Contacts:

Witness 1: _____	Date: _____	Phone: _____
Witness 2: _____	Date: _____	Phone: _____
Employer Representative: _____		Date: _____

FCSU Use Only

Reported on: _____	Claim # _____
Adjuster: _____	
Follow up:	