

Date of Incident	12-30-2024
Prepared By	Peter Tester
Property	7400 Roosevelt
Time of Incident	19:09:00
Location of Incident	Test location

Incident Type
Slip and Falls
Description of Incident
Test incident
Corrective action taken at the time of the incident
Test correctives
What we have done related to Customer Service and helping the resident, if anything?
Test plan
Witnesses names and phone number
Test witness and 1234567890
Was there security camera footage of this incident?
Yes
Link to security footage video in Box
Google.com
Did this incident involve a resident?
Yes
Unit
A001
Resident Name
test
Did this incident involve a Lindy team member?
Yes
Team Member Name
test arshad
Did this incident involve a vendor?
Yes
Vendor Name
test vendor
Should this incident be reported to the residents renters insurance policy?
Yes
What is the estimate of the loss?
yes
View Video

