



**INDEPENDENT PRODUCTION  
SAFETY INITIATIVE**



From the Producers Guild of America for a Safe, Harassment-Free Workplace

# Incident Log

DATE: \_\_\_\_\_

THIS REPORT HAS BEEN PREPARED BY: \_\_\_\_\_

PRODUCTION NAME: \_\_\_\_\_

COMPLAINANT(S) NAME(S): \_\_\_\_\_

ACCUSED NAME(S): \_\_\_\_\_

DATE(S) OF INCIDENT(S): \_\_\_\_\_

LOCATION(S) OF INCIDENT(S): \_\_\_\_\_

WITNESS NAMES (IF ANY): \_\_\_\_\_

BRIEF SUMMARY:  
\_\_\_\_\_  
\_\_\_\_\_

SUMMARY WAS RECORDED ON THE FOLLOWING MOBILE DEVICE:  
\_\_\_\_\_

## **ACTION(S) TAKEN IN THIS INCIDENT** (check all that apply, record date)

Incident reported to producer or appropriate supervisor DATE: \_\_\_\_\_

Producer or appropriate supervisor spoke with the complainant and the accused independently DATE: \_\_\_\_\_

Producer or appropriate supervisor mediated with all involved parties DATE: \_\_\_\_\_

Incident was resolved DATE: \_\_\_\_\_

Producer or appropriate supervisor addressed the topic at Safety Briefing or other meeting DATE: \_\_\_\_\_

Producer sought legal counsel DATE: \_\_\_\_\_

Other \_\_\_\_\_