**Damaged / Stolen/ Lost Asset Reporting Form**

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| **This form must be completed by any DCA staff member issued with or responsible for DCA Assets, in the event the asset is damaged, stolen or lost and then sent to the Logistics Officer and Programme Manager in Country and the Programme Coordinator at DCA HQ as soon as reasonably possible following an incident.**  **You will be notified if any additional information of supporting documentation is required.** |

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| **Country Programme:** |  | **Incident location:** |  |
| **Report completed by:** |  | **Position:** |  |
| **Signed:** |  | **Date:** |  |

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| **Incident Details:** | | | |
| **Date:** |  | **Time:** |  |
| Please provide as much detail as possible about how the asset was lost/damaged/stolen: | | | |
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| **Itemise Equipment loss:**  Please provide as much detail as possible for all items damaged / lost | | | |
| **Item**  Include Make/Model/Manufacturer | **Purchase Value**  If known | **Current Value**  If known | **Date of Purchase**  Detail approximate age of item if not known |
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| **Witnesses:** | | | |
| **Was the event witnessed?** |  | **Name of witness:** |  |
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| **Action Taken by Line Manager/ Manager Responsible:** |
| **What immediate action has been taken to prevent a similar incident and by whom?** |
| **Does the incident need further investigation to determine the underlying causes and corrective action?** |
| **What disciplinary action if any will be recommended to take against the employee concerned:** |

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| **Part 4 - Report close out** | | |
| **Title** | **Signature** | **Date** |
| **Programme Manager** |  |  |
| **HR Representative** |  |  |
| **Line Manager** |  |  |
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