



PLANT SECURITY REPORT
DISTRICT SCHOOL BOARD OF LEON COUNTY
2757 West Pensacola Street
Tallahassee, Florida 32304

PLEASE FORWARD RESPECTIVE COPIES AS FOLLOWS:

- White -Risk Management Department
Pink -Property Management
Blue -Maintenance Department
Goldenrod -School File

Date: _____

GENERAL INFORMATION
(ANSWER ALL ITEMS)

SCHOOL: _____ ADDRESS _____ PHONE _____

Date and Time of Incident _____ Investigating Agency _____

Forceable Entry _____ How _____ Location _____

Custodial hours necessary to cleanup? _____ Name of Investigator _____ TPD case # _____

Was Maintenance called? _____ Work Order Number assigned _____

Type of Damage (Check Item) Vandalism ___ Theft ___ Fire ___ Accident ___ Wind or Storm ___ Other _____

Place of Entry (Circle One): Classroom Cafeteria Library Office Washroom Gym Other _____

Specific Details of Losses or Damage (Where, What, and How): _____

MATERIALS AND EQUIPMENT STOLEN, DESTROYED, OR DAMAGED

Table with 6 columns: No. Of Items, Name of Item, DESCRIPTION, Check One, Year Purchased, Purchase Price. Includes a row for 'Stolen-Destroyed-Damaged'.

ADDITIONAL BUS VANDALISM INFORMATION

School Bus No. _____ Bus Operator's Name _____
Individual in Charge _____
Did incident occur on regular run? _____ Run No. _____ Field Trip? _____ Trip No. _____
Other Location (Please tell where) _____

Person Preparing Report & Title

Principal's (Manual) Signature