





Suspected Contamination Incident Report

1. Describe Event:

Please use the figure to note details of suspect's appearance.



Witnesses: Names	Phone Numbers

License number of suspect's vehicle?	
Other people associated with the attack?	
Food product suspected to have been contaminated?	
When was this product made?	
Location of incident:	
How did you learn of the incident?	
Was there video surveillance?	
Any known agent used?	
Suspect's observed activities:	
2. Date: Time of incident: am pm	
 3. Did manager close restaurant due to incident? Yes INO Suspect food isolated and protected from disturbance? 	
 4. Notification/Reporting of incident: Life threatening situation: 911 Portland Police: 503-823-3333 Health Department: 503-988-3400 (if food may have been served to people) Restaurant owner/management: Other: 	
Person completing this report:	