## **Hotel Guest Vehicle Damage Incident Report**

## **Guest Information** Name Room Number Contact Number **Email Address Vehicle Information** Make Model Color License Plate Parking Location **Incident Details** Date of Incident Time of Incident Location of Incident Description of Damage / Incident

Witness(es), if any

| Action Taken / Remarks |  |
|------------------------|--|
|                        |  |
|                        |  |
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|                        |  |
|                        |  |
| Reported By (Name)     |  |
|                        |  |
|                        |  |
| Date                   |  |
|                        |  |
|                        |  |