

4 IT INCIDENT REPORT TEMPLATE

Incident Title: _____

Date & Time of Incident: _____

Reported By (Name & Department): _____

Contact Information: _____

Location (Physical or Network): _____

• Incident Type (Check all that apply):

- System Outage
- Network Issue
- Hardware Failure
- Software/Application Issue
- Security Breach
- User Error
- Other: _____

Description of the Incident:

Provide a clear, concise explanation of what happened. Include details such as error messages, systems affected, and user-reported symptoms.

Users or Departments Affected:

- Immediate Impact:
- Minor – Minimal disruption, workarounds available
- Moderate – Disruption to multiple users, partial system loss
- Major – System-wide outage, critical operations affected

Brief Impact Description:

Initial Response Actions Taken:

Describe any steps taken to mitigate the issue or identify the cause.

Escalation Details:

- Escalated to: _____ (Tier 2 / Tier 3 / Vendor)

- Date & Time of Escalation: _____

Resolution Steps & Timeline:

Explain how the issue was resolved and the total time to fix.

Start Time: _____

End Time: _____

Steps Taken:

Post-Incident Follow-Up or Recommendations:

Optional: suggestions for preventing recurrence, monitoring, or training.

Submitted By: _____

Date: _____