M,1 Incident	M,1		1,M	Person	
es OK IncidentID	○<	places		<u>UserID</u>	PK
FK1 UserID				Passcode	
DateReported				FirstName	
DateFixed				LastName	
LastUpdatedDate				DOB	
Severity				Gender	
Address				Address	
City				Phone	
County				E-mail	
ZIPCode				City	
Landmark				County	
Note				ZIPCode	
Stage					
Picture					
Stage					