**Resident’s Incident /Accident Report**

To the Board of Directors

This form should either be mailed, faxed, or delivered in person to the CCT Management Office,

1 Channel Drive, Monmouth Beach, NJ, 07750, Fax: (732) 728-9373. From the CCT website, the document template should be downloaded and saved to your PC. It may then be printed and filled out, or the resident may type his/her information directly into the text boxes provided.

All maintenance requests should be made directly to the Management Office.

Hours: Monday-Friday, 9-5, Saturday 9-1, Tel. (732) 229-6663

|  |  |
| --- | --- |
| Resident’s Name (print) | Unit Number |
| Resident’s Signature | Submission Date |

|  |
| --- |
| Place |
| Date & Time of Incident/Accident |
| Parties Involved |
| Witnesses |
| Description |