

Details		
Company Name:		
Date and Time of Incident:		
Type of Incident:	ILL-HEALTH	MINOR INJURY
	NEAR MISS	SERIOUS INJURY
Description of what ha		happened to.



## Witness information

Include all those with relevant information (whether present or not).		
Include information from the person who was injured.		
Include information from the person who was injured.		



Workplace conditions		
Plant equipment condition		
Working method used		



Training / supervision / experience		
Other factors, including personal protective equipment		
Analysis and outcome What was the immediate cause?		



What were the underlying causes or contributing factors?		
What action is required to prevent similar occurrences? Include by whom and by when.		
Signed:	Position:	