**Incident/Hazard Report Form**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date** |  | | **Time** |  |
| **Name** |  | | **Sex** |  |
| **□ Staff □ Contractor □ Volunteer □ General Public** | | | | |
| **Department/**  **Company Name** | Sales&Marketing | Administration | **Location** |  |
| Executive | Operations |
| Dispatch | Logistics |
| Or ( ) | |
| **Incident/hazard**  **Type** | Accident  Injury  Assault  Machine fault  Mechanical failure | | **Persons involved** |  |
| **Description**  **of**  **Incident/hazard** |  | | | |
| **Witnesses** |  | | **Injury**  **Type** | Minor  Superficial  Moderate  Serious |
| **Description**  **of**  **Injuries** |  | | | |
| **Description**  **of**  **Actions taken** |  | | | |

**Submitted by**

**Approved by**