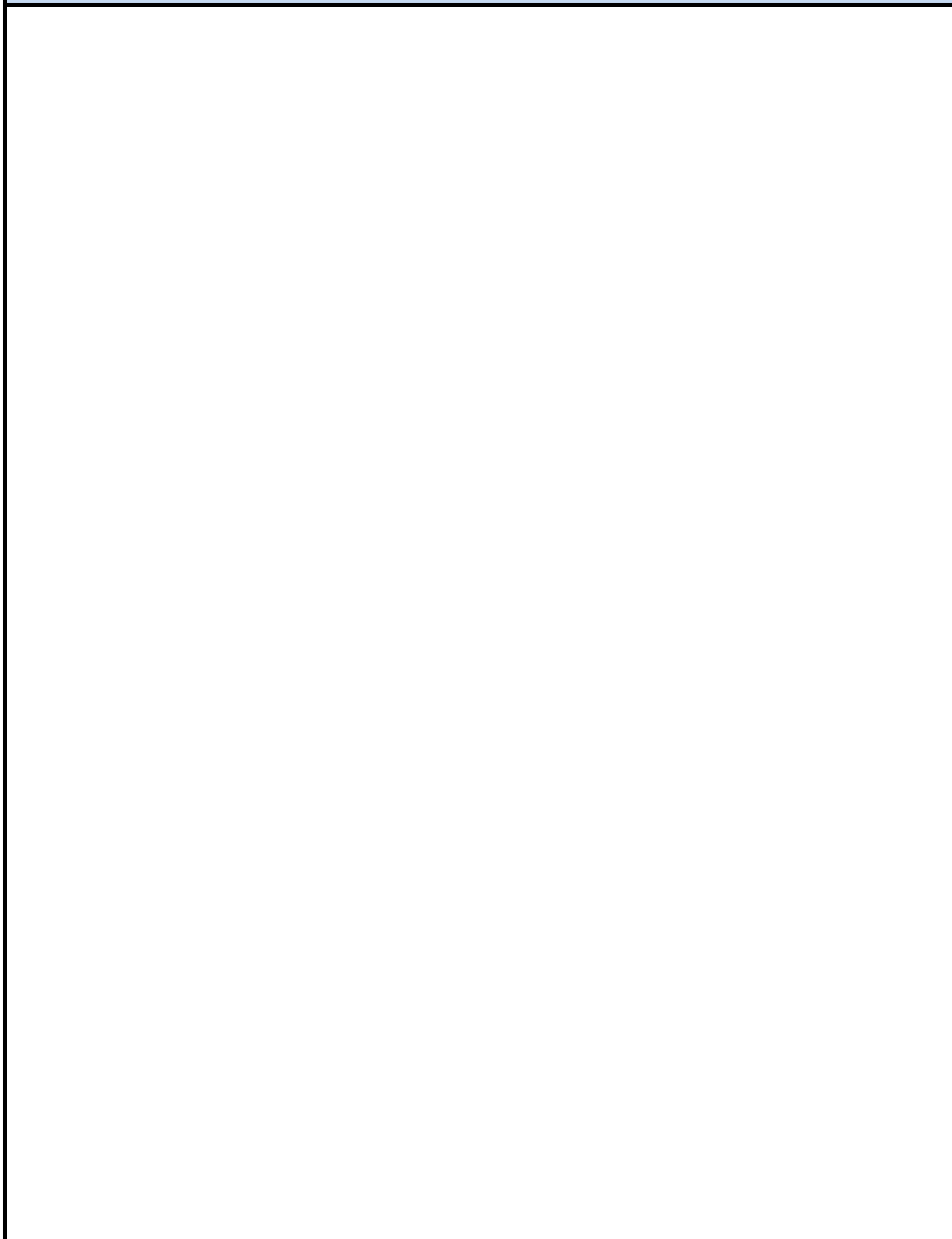


[illegible]

**PLEASE DRAW A SKETCH OF THE INCIDENT:** Add any important details.

A large, empty rectangular box with a black border, intended for drawing a sketch of the incident. The box occupies the majority of the page below the instruction header.

**Environmental:**

Substance Involved: \_\_\_\_\_ Environment Impacted: \_\_\_\_\_

Quantity Involved: \_\_\_\_\_ Quantity Released: \_\_\_\_\_

**Description of surrounding area and circumstances:** \_\_\_\_\_**Description of actions taken to stop/ control release, clean up and remediate site:** \_\_\_\_\_

Conditions during clean up: \_\_\_\_\_

Date clean up completed: \_\_\_\_\_ (MM/DD/YY) Deposit Location: \_\_\_\_\_

**Production Outage:**

Outage type: \_\_\_\_\_ Outage Duration: \_\_\_\_\_

Equipment Identification: \_\_\_\_\_

**Cause of Outage:** \_\_\_\_\_**Shutdown/ Startup Problems:** \_\_\_\_\_**Witnesses:**

Name: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Name: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Name: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Name: \_\_\_\_\_ Cell Number: \_\_\_\_\_

*Attach Witness Statement Form #...***External Reporting**

To be completed by Safety/ Environmental Advisor or Safety Codes officer:

Federal Agency: \_\_\_\_\_ Reference No.: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Notes:

**CAUSES:****Immediate Causes: (What unsafe acts/ conditions led to the incident?)**


**Root Causes: (What management system or human factors led to the unsafe act or condition above?)**


**Actions Taken:**

Immediate Actions Taken:	By Whom?	Date Completed:

Corrective Actions to Prevent Reoccurrence:	By Whom?	Date Completed:

**Report Completed By (Manager):**

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

**Reviewed By (Director):**

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

**Driver and Vehicle Information:**

Driver's Name: \_\_\_\_\_ Department: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Gender: M/F Employee #: \_\_\_\_\_  
Driver's License Number: \_\_\_\_\_ License Class: \_\_\_\_\_  
Expiry Date: \_\_\_\_\_ *Please attach copy of Driver's License.*

Vehicle Make/ Model: \_\_\_\_\_ Year: \_\_\_\_\_  
Serial Number: \_\_\_\_\_ License Plate: \_\_\_\_\_  
Odometer Reading: \_\_\_\_\_ Unit No: \_\_\_\_\_

**Conditions:**

Type of Collision: \_\_\_\_\_ Light Condition: \_\_\_\_\_  
Weather Condition: \_\_\_\_\_ Road Condition: \_\_\_\_\_

**Driver Action:**

Vehicle Action: \_\_\_\_\_ Travel Speed: \_\_\_\_\_ km/hr  
Travel Direction: \_\_\_\_\_ Violation Charge: \_\_\_\_\_  
Estimated Cost of Damages: \_\_\_\_\_

**Vehicle Damages:****Other Driver Action:**

Vehicle Action: \_\_\_\_\_ Travel Speed: \_\_\_\_\_ km/hr  
Travel Direction: \_\_\_\_\_ Violation Charge: \_\_\_\_\_  
Estimated Cost of Damages: \_\_\_\_\_

**Vehicle Damages:****Police Information:**

Reported to Police: Y/N Police Officer's Name: \_\_\_\_\_  
Badge Number: \_\_\_\_\_ Police Report Number: \_\_\_\_\_  
*Please attach police report.*

**Sketch:**