

## FORM A

### REPORT OF NEARMISS INCIDENT

1. Name of the Division/Unit
2. Location / place of incident
3. Date and Time of the incident
4. Name & Designation of the person escaped out of the incident, if any
5. Names of the persons who witnessed the incident
6. Probable cause of the incident
7. Whether the incident took place due to any unsafe action. If so, give details
8. Whether the incident took place due to any unsafe condition. If so, give details
9. Immediate actions taken by the Department to prevent recurrence of similar incidents
10. Whether any similar incident took place in the past in the department, if so, give the details of the incident
11. Direct / indirect losses due to the incident
12. Suggestions to avoid such incident in future

Place:

Signature of officer in charge

CC to: 1. Safety Department  
2. Project/Unit Head - for kind information

Signature of Head of the Department  
Name, Designation & Department

Note:

1. All near miss incidents shall be reported to Safety Department by the Division Head immediately or within 24 hrs.
2. Safety Department should investigate all near miss incidents and submit a report with remedial measures to Project / Unit Head with a copy to Central Safety Wing within 5 working days.