Logmaster Trucking

Risk Score

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INCIDENT/NEAR MISS REPORT FORM

Incident # 4 -	Date t	orm recieved:	Date form entered: 17/06/2013	
Date of Incident: 05/06/2013	Time of Inc	ident: 19:45 pm	Lost Time Incident: Yes	
Client: Forest Management Ltd	Sub Contra	ctor: United Logging	Crew: 6	
Truck: Truck AB 52	Trailer:		Compiled by: Mike MANAGER	
Incident Type: Health and Safety	Forest/Con	npartment: CHH Te Kao/6697		
Details of Incident:	Road: Chu	ch Road		
Skidded into ditch				
What happened or could have hap	ppened:			
Harm to People: None	Damage to	Property: None	Likelyhood of re-occurence: Rare	
Environmental conditions (if ap	plicable):			
Terrain:	Weather:	Temperature:	Wind:	
Causes of Incident:				
Immediate Causes:				

Basic Causes:	
Hazards that contributed towards the incident:	
Damage to Property:	
Property:	Damage:

People Involved in Incident:

Name: Involvment: Shift: Start Time: Operation: Industry Experience: Job Experience:

People Injured in Incident:

Name:	Severity:	Legal:	Days Lost:	Injury:	Part of Body:
Jones			0.00	Bruising	Left Shoulder
Treatment:					

Action taken to ensure it does not happen again:					
Action taken:	By whom:	Date Completed:			