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Information

Incident Report No.

Conducted on



Employee Name (optional):

Instructions:

- 1. Required to be completed when you experience a Safety Near Miss in the workplace
- 2. To be completed in full and emailed to direct manager or the Health & Safety Manager.

Near Miss Defined

OSHA and the National Safety Council defines a near miss as an “unplanned event that did not result in injury, illness or damage – but had the potential to do so.”

Date & Time of Near Miss:



Location of Near Miss. If customer site, please provide address



Select the category the near-miss most relates to:

- Fall from height
- Trip / Fall on same level
- Fall from equipment
- Hazardous Manual Handling
- Electric Shock
- Caught between/underneath
- Hazardous Substance
-

Describe how the Near Miss occurred (include the body part and type of pain):

Describe what lead up to and caused the Near Miss. Identify root causes:

What was learned and changed due to the Near Miss?

Photo/s that can help explain the what, where, why, or the possible injury:



Name and Signature (optional)



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