

ACCIDENT/INCIDENT REPORTING FORM

Under section 47 of the *Workplace Health and Safety Act 1995*, a Workplace Standards inspector must be notified, by the quickest available means possible, if:

- someone is killed
- someone suffers serious bodily injury or illness
- a dangerous incident occurs which could have resulted in someone being killed or suffering serious bodily injury or illness

The person with control or management of the workplace must do this by calling the **Workplace Standards Helpline on 1300 366 322** (or 03 6233 7657 outside Tas) and by following up within 48 hours by filling out and faxing this form to **6233 8338**. For other incidents and near misses, keep this for your own records only.

What	<i>Happened</i>	Give a brief description of the event – include a description of the work being done at the time
	<i>Injury</i>	Give a brief description of the nature and extent of any injury
		Admitted to hospital <input type="checkbox"/> Yes <input type="checkbox"/> No
	<i>Damage</i>	Give a brief description of the nature and extent of any damage to plant or property
When	<i>Time of incident</i>	
	<i>Date</i>	
Where	<i>Location of incident</i>	Specify site within workplace e.g. Loading Dock
	<i>Address of workplace</i>	Street Address Phone
Who	<i>Injured person</i>	Name
		Position
		Employer
	<i>Witness/es</i>	Name/s
	<i>Workplace</i>	Registered Business Name
		A. C. N.
		Registered Address
	<i>Reported by</i>	Name
		Position
		Date
Why	<i>Probable causes of the incident</i>	
	<i>What you will do to prevent this happening again</i>	