Incident and Hazard Reporting Form

If a safety incident occurs or hazard occurs during an APS NSW activity, even if no one is hurt, it must be reported. This ensures we send our members and visitors home safely! Please use this form, and give it to the activity leader, who will inform the District Group President and APS NSW President as soon as possible.

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| What was the incident or hazard? i.e. the task, equipment, tools and people involved. Include any action taken to ensure the safety of those who may be affected. |
| Location of incident and when it was identified (date, time) |
| Were any actions taken to fix the incident or hazard? Is it fixed? Y/N |
| Was anyone injured? If yes, please complete Injury and Illness form.  |
| Form completed by: (include contact details) |
| Date and signature |

**Details of person reviewing actions**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Role: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_