

# Tools & Resources

## Incident/ Hazard Report Form



Report Number

### 1. Reported by

Surname

Given name

Address

State

Postcode

Telephone: Home

Telephone: Business

### 2. Hazard details *Complete this section only if no injury or property damage has occurred*

Describe the hazard that exists

Describe any action taken

Describe any suggestions to remove hazard

### 3. Incident details *Complete this section only if an accident causes injury or property damage*

Name of injured person/owner of damaged property

Address

State

Postcode

Telephone: Home

Telephone: Business

Date of incident

 /  / 

Time

Location

Describe how the incident occurred (List sequence of events preceding incident)

Details of injury or property damage sustained

Details of subsequent events (e.g. treatment given, name of doctor, name of hospital)


#### 4. Declaration

I hereby declare the information provided above is true and

Signed

Date

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/   /
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#### 5. Investigation *Complete under the direction of the responsible officer or OH&S coordinator*

Details of investigation Attach sheet if necessary with additional details


What corrective action was identified?


Who is responsible for completing the corrective action?


Target completion/or review date

/   /
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Date corrective action completed

/   /
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Signed

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Responsible Officer

Signed

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OH&S Co-ordinator

#### 6. Definitions

Incident. Any event that gives rise to personal injury or damage to property, or has the potential to cause personal injury or  
Hazard. Any physical condition that exists on the property that has the potential, if left unchanged, to cause personal injury or  
damage to property.

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Southbank Boulevard,  
Southbank, VIC 3006

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Level 20,  
44 Market Street,  
Sydney NSW 2000

Queensland  
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110 Eagle Street,  
Brisbane QLD 4000

South Australia  
Suite 8.3,  
33 King William Street,  
Adelaide SA 5000

Western Australia  
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5 Mill Street,  
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