1. Answer the following questions

How were you contacted?  
☐ Witnessed accident/incident  
☐ Person  
☐ Other: _______________________

Who contacted you? _______________________________________________________________________

Please describe how you were notified in detail: _____________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

2. Only state the facts; do not editorialize on the form. Indicate circumstances of the accident/incident in the space provided below.

What did you see happen or were you told happened by the person notifying you of the accident/incident?
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

What actions did you take in the accident/incident response?
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Who was present at the time of the accident/incident?
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Note: A Safety Lead narrative should be completed by any Safety Lead who had any involvement with the accident/incident. Safety Leads should document what happened and/or what they did following the accident. This section should be completed at the time of the accident/incident.
Additional Notes:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Please sign and note the time & date.

Report completed by (please print name): ____________________________________

Program Area: __________________________  Position: _________________________

Email: ________________________________  Phone #: (   ) _______________________

Signature: _____________________________  Date: ____________________  Time: ________ AM PM

Do NOT make copies of this report or give the report to anyone or make any statements to anyone. Requests for copies of completed accident/incident reports should be directed to Jackie Puterbaugh at 855-7772.