

**Appendix F**

**Accident Investigation Report**

Division: \_\_\_\_\_  
Location: \_\_\_\_\_

Nature of Accident (please mark with check)  
Employee Injury \_\_\_\_\_ First-Aid Only \_\_\_\_\_  
Vehicle Accident \_\_\_\_\_ Third-Party Injury \_\_\_\_\_  
Property Damage \_\_\_\_\_ Near Miss \_\_\_\_\_

- 1. Name of Employee: \_\_\_\_\_ Age: \_\_\_\_\_
- 2. Occupation: \_\_\_\_\_ Dept.: \_\_\_\_\_
- 3. Date of Accident: \_\_\_\_\_ Time: \_\_\_\_\_
- 4. Place of Accident: \_\_\_\_\_
- 5. Witnesses: \_\_\_\_\_
- 6. Employee Treated by Physician? **Y N** Name and Address of Physician: \_\_\_\_\_
- 7. Did Injured Leave Work? **Y N** Returned to Work Next Business Day? **Y N**
- 8. Describe Injuries/Damage: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Describe Accident: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 10. Accident Causes:(check all that apply)  
**Physical Causes:**  
 Defective/Improper tools or equipment  
 Poor housekeeping(trash, slippery floor, etc.)  
 Unguarded/Improperly guarded equipment  
 Congested area  
 Unstable/Improper piling or storage  
 Improper light  
 Poor ventilation  
 Extreme temperature  
 Description of cause: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Personal Causes:**  
 Not properly trained/instructed  
 Failure to use Personal Protective Equipment  
 Failure to follow rules or instructions  
 Using improper/defective tools  
 Horseplay  
 Improper apparel  
 Using improper methods/procedures  
 Operating without authority  
 Distracted/Breakdown in awareness  
 Description of cause: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 11. Was accident: **Preventable/ Non-Preventable**
- 12. Disciplinary action taken? **Y N**  
If so, what type?  Coaching  
 Verbal warning  
 Written warning  
 Suspension  
 Termination
- 13. What should be done, and by whom, to prevent recurrence, and what is the expected completion date: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Signatures:** Prepared by: \_\_\_\_\_ (Supervisor) \_\_\_\_\_ (Date)  
Reviewed by: \_\_\_\_\_ (Safety Manager) \_\_\_\_\_ (Date)  
\_\_\_\_\_ (Human Resources) \_\_\_\_\_ (Date)