

Incident Report Template: Machinery-Related Injuries

General Information

Date of Incident

Time of Incident

Location

Reported By

Contact Information

Role/Position

Details of Injured Person

Name

Position/Title

Type of Injury

Severity

Select ▾

Injury Description

Incident Description

Describe how the incident occurred

Name/Type of Machinery Involved

Witness(es) (Name & Contact)

Immediate Action Taken

Root Cause Analysis

Probable Cause(s) of Incident

Recommended Preventive Actions

Additional Notes

Other Comments/Observations

Signature

Date