

Near Miss Incident Report Sample “Manufacturing

Date of Incident

Time

Location / Department

Reported By

Job Title

Incident Details

Describe the Incident (What happened?)

What was the potential outcome or possible injury/damage?

Immediate Actions Taken

What actions were taken to prevent the incident?

Root Cause Analysis

Identify the underlying causes of the near miss:

Recommendations / Corrective Actions

What measures are recommended to prevent recurrence?

Employee Signature

Supervisor Signature

Date

