

# Maintenance Accident Report

## General Information

Report Date

Report Time

Accident Location

## Personnel Information

Employee Name

Employee ID

Job Title

## Accident Details

Date of Accident

Time of Accident

Description of Accident

Description of Injuries (if any)

# Witness Information

Witness Name(s)

List any witnesses

# Immediate Actions Taken

Describe immediate actions taken after the accident

# Recommendations / Preventive Measures

Recommend actions to prevent recurrence

# Reported By

Name

Signature

Date