

Hazard and Near Miss Reporting Card

Date: _____

Location/Zone: _____

Employer: _____

Name Team leader/C.E./COE): _____

Tick the boxes applicable to the hazard or incident:

- | | | | |
|--|--------------------------|------------------------------|--------------------------|
| Behaviour | <input type="checkbox"/> | Signing, lighting & Guarding | <input type="checkbox"/> |
| PPE | <input type="checkbox"/> | Access & egress | <input type="checkbox"/> |
| Slips, trips & falls | <input type="checkbox"/> | Excavation work | <input type="checkbox"/> |
| Poor supervision | <input type="checkbox"/> | Plant & equipment | <input type="checkbox"/> |
| Lifting & carrying | <input type="checkbox"/> | Work at height | <input type="checkbox"/> |
| Environmental issues
(Noise, dust, lighting,
& material storage) | <input type="checkbox"/> | Chemical spillages & leaks | <input type="checkbox"/> |
| Danger to the public | <input type="checkbox"/> | Mains or service Laying | <input type="checkbox"/> |

Incident reporting hotline 0870 7000 150

hazard / near miss report card

Brief description of hazard/near miss:

Brief description of action taken to remove the hazard/near miss:

Please return to Support Services in Worsley