

Construction Site Accident Report

1. Site & Reporter Details

Date of Report

Time of Report

Project / Site Name

Location

Reported by (Name & Position)

Contact Information

2. Accident Details

Date of Accident

Time of Accident

Exact Location of Accident

Type of Accident

Describe How the Accident Occurred

Witnesses (Names & Contact Info)

3. Injured Person(s) Details

Name(s)

Position/Role

Nature of Injury

First Aid Given

Medical Attention Required

If Yes, Specify Clinic/Hospital

4. Equipment / Materials Involved

Details of Any Equipment or Materials Involved

5. Immediate Actions Taken

Describe Any Immediate Corrective Measures Taken

6. Additional Comments / Observations

7. Supervisor Review

Supervisor Name

Date