Kitchen Accident Report Form

| Date of Accident | |
|----------------------------|---|
| | |
| Time of Accident | |
| Location within Kitchen | |
| Location within Ritchen | |
| Reported By (Name) | |
| Person(s) Involved | |
| | |
| Nature of Accident | |
| | _ |
| Describe What Happened | |
| | |
| | |
| Describe Injuries (if any) | |
| | |
| | |
| Immediate Action Taken | |
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| | |
| Witnesses (if any) | |
| | |
| Additional Notes | |
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