

# Forklift Accident Investigation Form

## General Information

Date of Accident

Time of Accident

Location

Name(s) of Person(s) Involved

Forklift Model/ID

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## Accident Details

Describe What Happened

Witnesses

Injuries (if any)

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## Root Cause Analysis

Immediate Cause(s)

Underlying Cause(s)

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## Corrective Actions

Actions to Prevent Recurrence

Person Responsible

Target Completion Date

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## Investigator

Name

Date