

# Near Miss Event Report

## Maritime Operations

### General Information

Report Date

Reported by

Department / Crew

Vessel Name

Position (Lat/Long)

Date & Time of Near Miss

### Details of Near Miss

Description of Event

Immediate Actions Taken

Potential Outcome if Not Controlled

**Analysis**

Root Cause(s)

Suggestions for Corrective/Preventive Action

Supervisor/Officer in Charge

Date Reviewed