

On-Board Mechanical Failure Incident Report

General Information

Date of Report

Name of Reporter

Position/Role

Vessel/Vehicle Name

Voyage/Operation Number

Failure Details

Date & Time of Incident

Location (on board/coordinates)

Equipment/Component Affected

Description of Failure

Suspected Cause

Immediate Actions Taken

Details of Actions

Personnel Involved

Current Status

Status of Equipment

Is Further Action Required?

If Yes, describe required action

Additional Notes / Comments