Near-Miss Event Reporting Form (Maritime)

Event Details

Date of Event

Time of Event

Location

Vessel Name

Department

Individuals Involved

Names (if known)

Rank/Position

Description of Near-Miss

Describe What Happened

Potential Consequences (if not avoided)

Immediate Actions Taken

Actions Taken

Suggested Corrective Action / Preventive Measures

Suggestions

Reporter Information

Name

Rank/Position

Report Date