Manufacturing Plant Machinery Accident Report

Basic Details Date of Accident
Time of Accident
Location (Area/Department)
Employee Details Employee Name
Employee ID
Position
Machinery Details Machinery Name/ID
Type/Model
Accident Description Describe What Happened
Injury/Injuries (If any)
injury/injuries (ii arry)
Witnesses
Witness Name(s)
Immediate Actions Taken
Details of Actions

Supervisor/Manager Reported To Name

Time Reported			