



Accident / Incident Investigation Report

Cedar Health & Safety Consultants, 20 Aldford drive Atherton, M46 9SU
Tel: 01942 894187 Mob: 07792 749346 Email: Kevin.smith201@ntlworld.com

Report Ref. No:		
Name and Address of Client		
Location of Accident / Incident		
Nature of work at that location		
Date of Incident	Time of Incident	Weather Conditions
Name of Person/s involved		Age
		Date of Birth
Home Address		Occupation
		Date returned to work or expected to return
Injuries (state any on site treatment, hospital attended, whether or not detained)		
Names and addresses of any witnesses		
Plant Involved (include make, type, identification numbers, name of owner, details of any damage)		
Breach of current Health and Safety legislation		

Report Ref. No:

Details of Incident (include sketches, plans etc., if necessary)

Use continuation sheet/s if necessary

Report Ref. No:			
Additional relevant information	Y	N	N/A
Copy of B1 510A accident book			
Copy of RIDDOR notification to Health & Safety Executive (F2508) No: 03178905			
Copy of first aiders report			
Copy of Principal Contractors Investigation Report			
Copy of Safety Representatives Investigation Report			
Copies of Prohibition / Improvement Notices issued by HSE			
Copies of previous HSE Notices issued relevant to this investigation			
Any other communication with the HSE			
Copy of Induction Training Register			
Copy of Method Statement / Risk Assessments			
Copies of relevant COSHH assessments			
Copies of any Permit to Work			
Copies of skills training			
Copies of relevant on-site training i.e. toolbox talks			
Copies of Plant and Equipment Registers			
Any other information provided to the injured party prior to the accident			
Copies of Supervisor / Foremen training			
Copies of scaffold, netting, excavation etc. inspections			
Copies of manufacturers instructions in relation to plant or equipment			
Copies of Health Surveillance records			
Photographs relevant to the accident / incident			
Witness statements			
Post accident Method Statement			

Conclusion:

Use continuation sheet/s if necessary

Name of Investigator	Signature	Date
-----------------------------	------------------	-------------

See attached Statements and other relevant documentation