

INDIVIDUAL INCIDENT STATEMENT

1. Briefly describe the Incident: _____

2. Was Personal Protective Equipment (PPE) worn appropriately?

Yes No N/A

3. Were all appropriate tools and equipment involved with the Incident available and in proper working order? If no, what was the problem?

4. Who witnessed this event?

5. Could the Incident have been prevented? If so, how?

6. In your opinion, what (if anything) should be done in the future to prevent this type of Incident from reoccurring?

7. Did you or are you going to seek medical treatment? Yes No

I verify the information provided above is true and correct to the best of my recollection.

Name (please print): _____

Signature: _____ Date: _____