

# RAMSGATE AND DISTRICT MODEL ENGINEERING CLUB

## INCIDENT / ACCIDENT REPORT

Date & Time of Incident:	
Report completed by - print:	
Address / Location where incident occurred:	
Nature of Incident:	
Any Injuries:	YES / NO
Nature of Injuries:	
Action Taken:	
Action Taken By:	Print: _____ Sign: _____
Name(s) & addresses of injured parties:	
Confirmation of above by injured parties	Print: _____ Sign: _____
Riddor Report required?	YES / NO
Investigated cause of incident:	

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## INCIDENT / ACCIDENT REPORT

Investigated cause of incident continued:	
Actions required to prevent further occurrences:	
Comments:	
Incident Closed:	YES / NO
Date:	
Closed By - Print:	
Signed:	