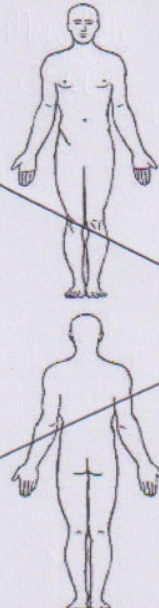


INCIDENT REPORT & INVESTIGATION



REPORT NO.

1	PROJECT / SITE DETAILS										
Project: (inc. Job No.)		Mayfair Stormwater and Reconstruction Project 0807a					Date:		14/02/24		
Location:		Mayfair Drive Emerald.									
Client:		CHRC.									
2	INJURED OR REPORTING PERSONS DETAILS										
Surname:		Rae RB			First name:		Chayne				
Address:		7 Dunkin St Emerald									
Occupation:		Machine operator		Phone:		0407176449		Length of service:		6 Mths Yrs	
Supervisor:		ZEB PAUL									
Witness 1:							Phone:				
Witness 2:							Phone:				
3	LOCATION / PERSONS DETAILS										
Location:					Class:						
☒ On duty – Site		☐ On duty – Off Site			☐ Worker		☒ Subcontractor		☐ Visitor		
☐ Off duty – Journey		☐ Off duty – Off Site									
4	INCIDENT DETAILS										
When/Where			Type of Incident				Notification				
Date: 14/02/24			☐ First Aid ☐ Medical Treatment ☐ Environmental ☐ Near Miss / Hit ☐ Report Only ☒ Other (eg. D&A failure)				☒ Vehicle Damage ☐ Equipment Damage ☐ Damage <\$1000 ☐ Damage >\$1000 ☐ Underground Service Strike ☐ Business Interruption				
Time: 3.10 am / pm							☒ Project Manager ☐ Site Manager ☐ Supervisor ☒ Client ☐ Relevant Authority				
Place: Mayfair Drive Onsite											
Shift: ☒ Day ☐ Night											
Hours into shift: 9											
Weather Conditions: ☐ Hot ☒ Warm ☐ Cold ☐ Cool ☐ Fine ☒ Cloudy ☐ Wet ☐ Windy											
Treatment Details			PPE Worn			Outcome					
First Aid ☐ or Medical ☐			☐ Helmet ☐ Gloves ☐ Face Shield ☒ Safety Boots ☐ Eye Protection ☐ Respiratory ☐ Ear Protection			Return to Work Normal Duties ☒ Return to Work Modified Duties ☐ Return to Work Alternate Duties ☐ Ceased Work ☐ Date 14/02/24 Time: 3.40pm					
Name of First Aider: Name of Doctor and Surgery: Injury Treatment:			Note: Modified duties = modified normal duties Alternate duties = changed duties								
5	EQUIPMENT DETAILS (complete if equipment damage was sustained)										
Plant ID No.		SC80		Rego No:		XQ 33 BT					
Equipment Description:		Small BT Tiptruck.									
Est. Repair Cost:		\$1200 - \$300									
Damage: (What was damaged?)		- Cracked Side Mirror Drivers side - Indicator Cover Broken + Popped off. - front Quarter Panel Popped + clip broken, No damage to Panel									

6	INJURY DETAILS <i>Note: all injuries must have treatment details completed</i>				
	Body part: ☐ Left ☐ Right ☐ Both				
	Location of Injury ☐ Head/face ☐ Eye ☐ Ear ☐ Neck ☐ Shoulder ☐ Body/skin ☐ Back/spine ☐ Arm/elbow ☐ Hand/wrist ☐ Leg/knee ☐ Foot/ankle ☐ Multiple ☐ Other: Draw location of injury/s on diagrams		Nature of Injury ☐ Fracture ☐ Dislocated ☐ Sprain/strain ☐ Internal ☐ Laceration/amputation ☐ Bruise ☐ Crush injury ☐ Foreign body ☐ Hearing impairment ☐ Burn ☐ Acute poisoning ☐ Asphyxia ☐ Multiple: ☐ Illness ☐ Medical condition	Agency of Injury ☐ Machinery/fixed plant ☐ Mobile plant ☐ Road transport ☐ Other transport ☐ Powered equipment tools ☐ Non powered hand tools ☐ Chemicals ☐ Other materials / substances ☐ Outdoor environment ☐ Indoor environment ☐ Unspecified agencies ☐ Other:	Mechanism of Injury ☐ Fall from same level ☐ Fall from different level ☐ Strike against ☐ Struck by ☐ Caught between ☐ Exposure to noise ☐ Exposure to pressure ☐ Repetitive movement ☐ Other muscle stress ☐ Contact with electricity ☐ Exposure to heat/cold ☐ Exposure to substances ☐ Excavation cave in ☐ Other:
7	SEVERITY ASSESSMENT				
	Was a SWMS/JSA completed prior to starting the job? ☒ Yes (attach copy) ☐ No If no, explain why:				
	Did the SWMS/JSA address all relevant hazards? ☒ Yes (attach copy) ☐ No If no, explain why:				
	In respect to this incident, was training given? ☒ Yes ☐ No				
8	DESCRIPTION				
	Description of how incident happened: <i>Provide sketch and photos if possible</i> Was Reversing back had to go left hand down to ground corner Clipped back of life - SC80 Was Reversing in to be loaded with Material, SC92 was parked on the side of the corner in the work area. SC80's mirror clipped the steel rack on SC92 and also the side indicator resulting in the indicator cover popping off and front Quarter panel popping a plastic clip. Nil Damage to SC92				
9	CONTRIBUTING FACTORS				
	Describe all contributing factors (environment / task / experience): Not much Space Small area light vehicle parked in area - tight work area, multiple crews working concurrently in a small area.				

SEAFORTH CIVIL

Note: Please attach Person Involved and or Witness Statements as required.

- Immediately return form to Seaforth Civil office
- If the accident/incident is of a serious nature ensure you have telephoned Seaforth Civil General Manager and advised of the situation

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hasmotek

OBJECTS IN MIRROR ARE CLOSER
THAN THEY APPEAR



 **SEAFORT**
CIVIL

AUTO

165 300
59T

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