



Near Miss Report

1. Date and Time of Incident:		Reference No		
2 Name of Reporting Officer				
3. Location of Incident:				
4. To whom was the Incident reported:				
5. Date and time reported:				
6. Details of Incident				
7. Action Taken to Prevent Reoccurrence				
8. Rating of Incident (potential)				
Fatality	1	☐	Note some incident are Reportable to the Health and Safety Executive HSE under RIDDOR if this was the case:	
Serious	2	☐		
Minor Injury	3	☐	Who submitted the report	
Loss/Damage to property	4	☐	Date of Submission	
9. Declaration				
I hereby declare that to the best of my knowledge and belief that the statements and particulars in my report are true, and that no material information within my knowledge has been withheld.				
Name: (Block Capitals)	Signature:		Date:	