

GA16 Near miss or learning event report (Part 1)

To be completed and handed to site management

Company name				Project title			
Location				Contract no.			
Name							
Date				Time			
Classification (tick)							
Health			Safety			Environment	
Details of the learning event (include all relevant information)							

Please report anything that is unsafe or a near miss



Signature

Name

It really does help to prevent accidents

Position

Date