

Accident Investigation Report

Date of Incident: [Insert Date]

Time of Incident: [Insert Time]

Location: [Insert Construction Site Location]

Parties Involved:

- Name: [Insert Name]
- Position: [Insert Position]
- Contact Information: [Insert Contact Information]

Description of the Incident:

[Provide a detailed description of the incident, including what happened, how it happened, and any contributing factors.]

Witnesses:

- Name: [Insert Witness Name] - Contact: [Insert Contact Information]
- Name: [Insert Witness Name] - Contact: [Insert Contact Information]

Immediate Actions Taken:

[Detail any immediate responses to the incident, such as first aid provided and safety measures enacted.]

Investigation Findings:

[Summarize the findings of the investigation, including root causes and any violations of safety protocols.]

Recommendations:

- [Recommendation 1]
- [Recommendation 2]
- [Recommendation 3]

Investigator's Name:

[Insert Investigator's Name and Title]

Signature:

[Insert Signature]

This report is confidential and intended for internal use only.