

# Accident Incident Assessment Form Sample

**Accident Incident Assessment Form** is a crucial document used to systematically evaluate and record the details of an accident or incident. It helps organizations identify causes, assess risks, and implement preventive measures. Utilizing such a form enhances workplace safety and compliance with regulatory standards.

## 1. Basic Information

Date of Incident:	<input type="text"/>	Time:	<input type="text"/>
Location of Incident:	<input type="text"/>		
Name of Person(s) Involved:	<input type="text"/>		
Reported By:	<input type="text"/>	Department:	<input type="text"/>

## 2. Incident Details

Description of Incident:
<input type="text"/>
Immediate Actions Taken:
<input type="text"/>
Witness(es) (if any):
<input type="text"/>

## 3. Assessment

Root Cause(s):
<input type="text"/>
Risk Evaluation:
<input type="text"/>

## 4. Preventive Measures & Recommendations

Recommendations/Corrective Actions:
<input type="text"/>
Person Responsible:

<div></div>
<b>Target Date for Implementation:</b>
<div></div>

5. Final Review & Signatures

<b>Assessor's Name:</b>	<div></div>	<b>Date:</b>	<div></div>
<b>Signature:</b>	<div></div>		