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**Near Miss Reporting Form**

|  |
| --- |
| **NEAR MISS DETAILS** |
| Date and time of the near miss | **:** |  |
| Location of the near miss | **:** |  |
| Describe the near miss | **:** |  |
|  |  |  |
| Details of the witnesses, if any | **:** |  |
|  |  |  |

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| **NEAR MISS CATEGORY** |
| Select the appropriate category for the near miss: |
|  |  |
| [ ]  | Slip, Trip, or Fall |
| [ ]  | Equipment or Machinery Malfunction |
| [ ]  | Unsafe Work Conditions |
| [ ]  | Hazardous Material Exposure |
| [ ]  | Communication Failure |
| [ ]  | Procedural Error |
| [ ]  | Other (specify**) :** |  |

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| **PERSON(S) INVOLVED** |
| Name(s) of the person(s) directly involved in the near miss | **:** |  |
|  |  |  |
| Job title(s) of the person(s) involved | **:** |  |
|  |  |  |

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| **DESCRIPTION OF POTENTIAL CONSEQUENCES** |
| Describe the potential consequences if the near miss had resulted in an incident | **:** |  |
|  |  |  |

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| **ACTIONS TAKEN** |
| Describe any immediate actions taken to prevent an incident after the near miss | **:** |  |
|  |  |  |

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| **CONTRIBUTING FACTORS** |
| Were there any contributing factors to the near miss? If yes, select the relevant factors: |
|  |  |
| [ ]  | Inadequate training |
| [ ]  | Equipment failure |
| [ ]  | Unsafe work conditions |
| [ ]  | Poor housekeeping |
| [ ]  | Human error |
| [ ]  | Lack of supervision |
| [ ]  | Lack of Communication |
| [ ]  | Time pressure |
| [ ]  | Other (Specify**) :** |  |
|  |  |  |

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| **PREVENTIVE MEASURES** |
| What preventive measures can be implemented to avoid similar near misses in the future? | **:** |  |
|  |  |  |

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| **ADDITIONAL COMMENTS** |
| Is there any additional information or comments you would like to include? | **:** |  |
|  |  |  |

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| --- |
| **REPORT FILTER** |
| Name | **:** |  |
| Job Title / Role | **:** |  |
| Contact Details | **:** |  |

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