



ACCIDENT & NEAR MISS REPORT FORM (Rev May 2025)

Report

FoHMP /

Number

1. About the person who had the accident or person reporting near miss

Friends of Headstone Manor Park Representative			
Name:		Occupation/Status:	
Address:			
Postcode:			
Telephone / Mobile No.		Email:	

2. About the incident continue on the back of this form if necessary

Date of occurrence:		Time of occurrence:	
Nature of incident (Accident or Near Miss)			
Location of incident:			
Summary of incident	Describe what happened or what was observed. Indicate what task was being carried out at the time and include details of any witnesses involved and any control measures (e.g., PPE) that were in place at the time. Continue on Page 2.		
Root Cause:			
Nature of injury (if any):			

3. Declaration

I confirm that the above information is correct to the best of my knowledge.

Friends of Headstone Manor Park representative making report:			
Signature:		Date:	

Name of person that had the accident:			
Signature:		Date:	