

# DUNSTON PARISH COUNCIL

## ACCIDENT REPORT FORM

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**To be completed as soon as possible after the accident:**

- By the person suffering the accident
- Or by a member or officer of the council
- Counter-signed by the witness/es and passed to the Clerk

**For Notifiable <sup>Note 2</sup> incidents/accidents.**

- HSE report forms F2508 are also to be completed.
- These forms are required to be completed and sent to the relevant enforcing authority within 15 days of the incident or accident.

**Record Keeping**

- Written records of reportable accidents and dangerous occurrences (i.e. those which must be reported to the appropriate enforcing authority) are to be kept by the Parish Clerk for a minimum of three years
  - or **21 years in the case of Playground Accidents involving children**
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Accident date \_\_\_\_\_ Accident time \_\_\_\_\_ Male / Female \_\_\_\_\_

Injured person name \_\_\_\_\_ Phone number/s \_\_\_\_\_

Address \_\_\_\_\_

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**Details of the accident** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Injury type** \_\_\_\_\_

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Does the injury require hospital/Physician? Yes \_\_\_\_ No \_\_\_\_

Hospital Name \_\_\_\_\_

Injured Person /party or responsible adult signature & date \_\_\_\_\_

Important notes and instructions \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Prepared by Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Approved By Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_