MAID FOR EACH OTHER LTD.

Accident Report Form

1. Details of the Injured Person

- Full Name:
- Job Title/Position:
- Address:
- Phone Number:
- Date of Birth:

2. Accident Details

- Date of Accident:
- Time of Accident:
- Location of Accident (specific area):
- Type of Accident (e.g., fall, cut, burn, etc.):

3. Description of the Accident

- Describe what happened:
  (Please provide a clear and detailed description of the accident, including any equipment involved, actions leading to the accident, and any other relevant information)

4. Injury Details

- Description of Injury:
  (Specify the body part affected and the severity of the injury)

- Did the injured person receive first aid?
  ☐ Yes
  ☐ No
- If yes, describe the first aid provided:

5. Witnesses to the Accident

- Were there any witnesses?
  ☐ Yes
  ☐ No
- If yes, please provide witness details:
  - Witness 1 Full Name:
  - Witness 1 Contact Number:
  - Witness 2 Full Name:
  - Witness 2 Contact Number:

6. Actions Taken After the Accident

- Was the injured person sent to a doctor/hospital?
  ☐ Yes
  ☐ No
- If yes, provide details (e.g., hospital name, medical professional's name):

- Was the accident reported to a supervisor/manager?
  ☐ Yes
  ☐ No
- Name of person reported to:
- Date and time of report:

7. Follow-up Actions

- Were any corrective actions taken to prevent future accidents?
  ☐ Yes
  ☐ No
- If yes, describe the actions taken:

8. Report Completed By

- Full Name:
- Job Title/Position:
- Signature:
- Date:

9. Management Review (To be completed by a manager or supervisor)

- Was the incident reviewed?
  ☐ Yes
  ☐ No
- Recommendations for further action (if applicable):

- Manager's Full Name:
- Signature:
- Date:

For Office Use Only

- Accident Report Number:
- Date logged in company records:
- Further action required?
  ☐ Yes
  ☐ No
- If yes, specify:

This form should be filled out as soon as possible after the accident and submitted to management for review. A copy of this report must be kept on file for future reference and compliance with UK health and safety regulations.