

Near Miss Report Form (US)

Safety & Compliance | US

DATE OF EVENT ____ / ____ / ____	TIME	LOCATION / DEPARTMENT	REPORTED BY
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DETAILS

What happened? (brief description)

What could have happened?

Who was at risk?

Equipment / materials involved

Contributing factor 1

Contributing factor 2

Immediate action taken

Recommended corrective action

Assigned to

Target completion date

Reporter signature

Supervisor acknowledgment

EHS manager review

Notes

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