

# INLAND WATERWAYS ASSOCIATION

## ACCIDENT REPORTING FORM



1 About the person who had the accident		
Name:		
Address (including postcode):		
Occupation:		
2. About you, the person filling in this record		
Name:		
Address (including postcode):		
Occupation:		
3. About the accident <small>Continue on back of this form if you need to</small>		
Say when it happened:	Date:	Time:
Say where it happened. State which room or place:		
Say how the accident happened. Give the cause if you can:		
If the person who had the accident suffered an injury, say what it was:		
Please sign the record and date it:	Signature:	Date:
4 For Head Office only		
Action Taken:		
Circulated to IWA Trustees:		
5. Complete this box if the accident is reportable under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR):		
How was it reported?		
Date Reported:	Signature:	

**Please send completed forms to:**  
**Jenny Hodson, The Inland Waterways Association,**  
**Unit 16B Chiltern Court, Asheridge Road, Chesham, HP5 2PXA**  
**or email [jenny.hodson@waterways.org.uk](mailto:jenny.hodson@waterways.org.uk)**

Reference No: