

## Forest Permit – Activity – Incident Report Form

Please complete this form for all incidents taking place during event and activities held under permit from Forestry Corporation of NSW.

Incidents must be reported to Forestry Corporation within 5 working days (24 hours if it is a fatality or major incident).

Please return this form to the Forestry Corporation Regional Office that issued your permit. For contact details visit [www.forestrycorporation.com.au](http://www.forestrycorporation.com.au)

Type of incident (please tick box)	<input type="checkbox"/> Near miss <input type="checkbox"/> No injury <input type="checkbox"/> Injury sustained <input type="checkbox"/> Fatality		
Date of incident		Time of incident:	
State Forest		Description of incident location:	
Injured persons role	<input type="checkbox"/> Participant <input type="checkbox"/> Spectator <input type="checkbox"/> Volunteer <input type="checkbox"/> Event Staff		
Describe the incident			
Describe the injury			
Describe the initial first aid treatment given and by whom			
Describe any further actions taken (e.g. ambulance called)			
Any further comments			
Name and role of person completing this form	Contact details		
	Date		

<b>Office use only</b>				
Date form received		Date entered into FCNSW Incident Reporting System		By Who
Comments				