**Part A**

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| [ ]  | **Vessel Near Miss** | [ ]   | **Marine Incident- Navigation** | [ ]   | **Marine Incident- Cargo Operation** |
| **Date of Incident** |  | **Time of Incident** |  |
| **Incident Report Reference No**  |  | **Date of Investigation Report** |  |
| **Name of Vessel**  |  | **Vessel IMO No.** |  |
| **Name of other involved Vessel** |  | **Other involved vessel- IMO No.** |  |
| **Incident Location** | [ ]  HQ  | [ ]  KIZAD | [ ]  ZP  | [ ]  KP  | [ ]  MUS  | [ ]  FP  | [ ]  Fuj | [ ]  WRP  |
| Specify the location: |
| **Investigation Team**  |
| **Team Leader Name** | **Designation** | **Origination / Department** |
|  |  |  |
| **Investigation Team Name** | **Designation** | **Origination / Department** |
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| **Interviewed Personnel** |
| **Name**  | **Designation**  | **Organization / Department**  |
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| **Incident Description & Summery** |
|  |
| **Weather/ Climate Conditions** |
| **Sea conditions** (wave height, etc.) |  |
| **Weather** | [ ]  Clear | [ ]  Rain | [ ]  Fog | **Wind (Speed & Direction)** |  |
| **Time** | [ ]  Daylight | [ ]  Twilight | [ ]  Night | **Current (Speed & Direction)** |  |
| **Visibility** | [ ]  Good | [ ]  Fair | [ ]  Poor | **Visibility (Distance NM)** |  |
| **Incident Information updated after investigation**  |
| **Incident Type & Consequences,** Specify Number or Quantity |
| [ ]  Fatality  |  | [ ]  Fire/ Explosion | [ ]  Environmental Pollution |
| [ ]  Missing Persons |  | [ ]  Collision | [ ]  Cargo Damaged |
| [ ]  Injury  |  | [ ] Allision | [ ]  Aids to Navigation Damage |
| [ ]  Illness  |  | [ ]  Grounding | [ ]  Property/ Infrastructure Damage |
| [ ]  Spill of Oil & Fuel  |  | [ ]  Sinking/ Listing | [ ]  Steering/ Equipment Failure |
| [ ]  Spill of Hazardous Material |  | [ ]  Capsizing  | [ ]  Structural Failure |
| **[ ]**  Other, Specify: |  | [ ]  Flooding/ Swamping (without Sinking) | **[ ]**  Operation Interruption |

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| **Incident Type & Consequences,** Specify Number or Quantity |
| **If applicable; details of****Injury/ Illness** (Cut, fracture, burn, etc.) |  |
| **Part(s) of Body Injured, If applicable** (Head, Arm, Chest, Leg.) |  |
| **Environmental Impact, If applicable**(Release to Land, Sea, Quantity, etc.) |  |
| **Property/ Infrastructure Damage** |  |
| **Vessel/ Barge Damage**  |  |
| **Cargo**  |  |
| **Other**  |  |
| **Injury Severity** | **Environmental Incident Severity (Spill / Release)** |
| [ ]  Minor Injury require first aid treatment  | [ ]  Minor 5- 1,000 Liters  |
| [ ]  Injury Requires Medical Treatment  | [ ]  Moderate Spill 1,001- 10,000 Liters |
| [ ]  Medical treatment- in-patient, How Many Days? \_\_\_\_\_\_ | [ ]  Major Spill 10,001- 500,000 Liters |
| [ ]  Restricted Work | [ ]  Catastrophic Spill more than 500,001 Liters |
| [ ]  Lost Time Case |  |
|  **Incident Investigation Pictures** |
|  |  |  |  |
| **Attached Reports** | [ ]  Police | [ ]  Master Statement of Fact | [ ]  Involved/ Witness Statement |
| [ ]  Medical | [ ]  Work Instruction/ Procedure | [ ]  Photo/ Drawing |
| [ ]  MSDS | [ ]  Third Party Investigation | [ ]  Others |
| **Incident Findings & Causes**  |
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| **Key Corrective Actions Taken Immediately After the Incident:** (Attach additional pages if more space is required)  |
| **Action** | **Responsibility** | **Due date** | **Status** |
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| **Incident Root Causes** |
| **Incident Root Causes** | **Groups**(Unsafe Act, Unsafe Condition, Individual, Administrative, Engineering) | **Contributions** |
| Direct | Indirect |
|  |  |  | [ ]  | [ ]  |
|  |  |  | [ ]  | [ ]  |
|  |  |  | [ ]  | [ ]  |
|  |  |  | [ ]  | [ ]  |
| **Incident Investigation Team Recommendations**  |
|  |
| **Incident Cost:** (Approximate / Best Estimate) | **Estimated Amount (AED)** |
| [ ]  Injury Cost (Treatment, Hospital, Transport, Insurance, etc.) |  |
| [ ]  Legal Cost (Compensation claims, judicial prosecutions, etc. –) |  |
| [ ]  Productivity Cost (Business Disruptions, Delays, Production Loss / Day, Material, Salaries, etc.) |  |
| [ ]  Asset Cost (Property, Machinery, Equipment, Structure, Vehicle, etc. – Repair, Maintenance, Replacement) |  |
| [ ]  Enforcement Action (Penalty Issued by Authority) |  |
| [ ]  Incident Scene / Area Restoration Cost (arrangements to making safe, cleanup, etc.) |  |
| [ ]  Emergency Response Cost (Firefighting, Hazmat, Oil Spill, etc... |  |
| [ ]  Other Cost relevant to / associated with the Incident |  |
| **Total**  |  |
| **Team Leader** |
| **Name & Signature** |  | **Date & Time** |  |
| **Stamp** |  |

**Part B**

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| **Corrective Actions to Prevent Recurrence:**  |
| **Action** | **Accountable Organization/ Department** | **Accountable Person**  | **Targeted Date**  | **Status** |
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| **Approval of Accountable Department**  |
| **Name**  | **Designation**  | **Organization/ Department**  | **Date** | **Signature** |
|  |  |  |  |  |
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| **Approval of Harbour Master Office**  |
| **Comments**  |  |
| **Name & Signature** |  | **Date & Time** |  |
| **Stamp** |  |

**Part C**

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| **OFFICIAL USE ONLY BY ABU DHABI PORTS - HSE DEPARTMENT** |
| **Incident Ref. No.:** |  |

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| **Category of Involved Person** (Relationship with Abu Dhabi Ports) |
| **[ ]  Abu Dhabi Ports** | [ ]  Abu Dhabi Ports Employee (Direct Hire) | [ ]  Abu Dhabi Ports Outsourced Employee |
| **[ ]  Contractors** | [ ]  Contractors- Non-nominated Entity | [ ]  Contractor Nominated Entity |
| **[ ]  Tenants** | [ ]  High Risk Tenant | [ ]  Medium Risk Tenant | [ ]  Low Risk Tenant |
| **[ ]  Nominated Entity** | [ ]  Government Stakeholders | [ ]  Industrial (Nominated Entity) | [ ]  Other Nominated Entity |
| **[ ]  Visitors** | [ ]  Calling Vessels | [ ]  Drivers | [ ]  Passengers | [ ]  Visitors, Student |

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| **Accountable Business Unit** (Relationship with Abu Dhabi Ports) |
| [ ]  KP | [ ]  ZP Region | [ ]  SAFEEN | [ ]  Kizad | [ ]  Programme Management |

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| **Type of Incident** |
| **[ ]**  | **Not Recordable as Incident** | **[ ]**  First Aid Incident | **[ ]**  Near Miss |
| **[ ]**  | **Recordable** | **[ ]**  Minor Injury | **[ ]**  Environmental Pollution  | [ ]  Minor Dangerous Occurrence  | **[ ]**  Minor Occupational Illness |
| **[ ]**  | **Reportable** | **[ ]**  Serious Injury | **[ ]**  Serious Occupational Illness | [ ]  Serious Dangerous Occurrence  | **[ ]**  Fatality |
| **Incident Classification**  | [ ]  Category 0 (Minor) | [ ]  Category 1 (Serious) | [ ]  Category 2 (Critical) | [ ]  Category 3 (Catastrophic) |
| **Emergency Level** | [ ]  Category 0 (OSC) | [ ]  Category 1 (IMT) | [ ]  Category 2 (CMT) | [ ]  Category 3 (CMT) |

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| **Incident Status** |
| □ Further investigation is required | **[ ]**  Investigation is closed | **[ ]**  Corrective action is Open | **[ ]**  Corrective action is closed |
| **Incident Classification** |
| **[ ]**  Category 0 (Minor) | **[ ]**  Category 1 (Serious) | **[ ]**  Category 2 (Critical) | **[ ]**  Category 3 (Catastrophic) |
| **Emergency Level** |
| **[ ]**  Category 0 (OSC) | **[ ]**  Category 1 (IMT) | **[ ]**  Category 2 (CMT) | **[ ]**  Category 3 (CMT) |
| **HSE Recommendations/ Comments** |
|  |
| **Name** | **Position** | **Contact Number** |
|  |  |  |
| **Signature Stamp** | **Date** | **Time** |
|  |  |  |