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| **INCIDENT REPORT FORM** | |
| Author: Choose an item. | Number: Select |

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| 1 | ENVIROMENTAL DETAILS | | | | | | | | | |
| **Date:** | | Click here to enter a date. | | **Location** | | | Click here to enter text. | | | |
| **Time:** | | Click here to enter text. | | **Visibility** | | | Choose an item. | | | |
| **Daylight/ Dark** | | Choose an item. | | **Sea State** | | | Choose an item. | | | |
| **Wind Dir Spd** | | Click here to enter text. | | **Weather** | | | Choose an item. | | | |
| **Height of Tide** | | Click here to enter text. | | **Flood /Ebb** | | | Choose an item. | | | |
|  | |  | |  | | |  | | | |
| Over all conditions | | | **Good** | |  | **Fair** | |  | **Poor** |  |

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| 2 | VESSEL(S) | | | |
| **Name** | | Choose an item. | **Name** | Choose an item. |
| **Length** | | Click here to enter text. | **Length** | Click here to enter text. |
| **Beam** | | Click here to enter text. | **Beam** | Click here to enter text. |
| **Draft** | | Click here to enter text. | **Draft** | Click here to enter text. |
| **Pilot/ PEC** | | Choose an item or type | **Pilot/ PEC** | Choose an item or type |
| **Type** | | Choose an item. | **Type** | Choose an item. |

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| 3 | **OPERATIONS** | | **Berthing** |  | **Un berthing** |  | **At Anchor** |  |
| **Underway within the Harbour** | |  | **Engaged in Towing** |  | **Engaged in pilotage** |  | **Conservancy** |  |
| **Underway within the Approaches** | |  | **Debris** |  | **Mooring operations** |  | **Bunker/Cargo ops** |  |

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| 4 | MAIN INCIDENT TYPE (Max 3 per incident) | | | | | | | |
|  | | Minor | Moderate | Serious |  | Minor | Moderate | Serious |
| **Collision – any other vessel** | |  |  |  | **Pollution** |  |  |  |
| **Contact – Fixed object** | |  |  |  | **Person Overboard** |  |  |  |
| **Grounding** | |  |  |  | **Machinery or Hull failure** |  |  |  |
| **Near Miss (Estimate)** | |  |  |  | **Capsize/Listing/Sinking** |  |  |  |
| **Fire/Explosion/Flooding** | |  |  |  | **Other on board incident** |  |  |  |

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| 5 | **DESCRIPTION** (Please use an additional sheet if required, attach photos if possible) |
| Click here to enter text. | | |

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| 7 | **SUBMISSION DETAILS** |
| Please send the completed form to the Harbour Master | |

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| **INCIDENT INVESTIGATION FORM** |

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| 1 | **INCIDENT CLASSIFICATION** | | | | | Number: | **Select** | |
| Accident | |  | **Near Miss** |  | **Observation** | | |  |

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| 2 | **OPERATIONS** | | **Berthing** |  | **Un berthing** |  | **At Anchor** |  |
| **Underway within the Harbour** | |  | **Engaged in Towing** |  | **Engaged in pilotage** |  | **Conservancy** |  |
| **Underway within the Approaches** | |  | **Debris** |  | **Mooring operations** |  | **Bunker/Cargo ops** |  |

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| 3 | **POTENTIAL RISK RANKING** | | | | | | | | | | | | | | | | | | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | ***People*** | | |  |  | ***Environment*** | | |  |  | ***Users*** | | |  |  | ***Business*** | | |  |
| **H** |  |  |  |  | **H** |  |  |  |  | **H** |  |  |  |  | **H** |  |  |  |  |
| **M** |  |  |  |  | **M** |  |  |  |  | **M** |  |  |  |  | **M** |  |  |  |  |
| **L** |  |  |  |  | **L** |  |  |  |  | **L** |  |  |  |  | **L** |  |  |  |  |
|  | **L** | **M** | **H** |  |  | **L** | **M** | **H** |  |  | **L** | **M** | **H** |  |  | **L** | **M** | **H** |  |

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| 4 | **MAIN INCIDENT FACTORS (MAX 3 per incident)** | | | | | | | |
| **Inappropriate vessel Navigation** | |  | **Hazards to Navigation (obstruction in channel)** |  | **Incorrect Procedures** |  | **Poor passage planning/**  **Deviation from plan** |  |
| **Breech of regulations** | |  | **Poor bridge communication**  **(eg Pilot/Master)** |  | **Lack of training/Skill** |  | **No Lifejacket/ LSA worn** |  |
| **Mechanical/Equipment Failure** | |  | **Poor Communications**  **(eg ship to Ship, Ship to VTS)** |  | **Fatigue** |  | **Other (state)**  **Error** |  |

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| **5** | INJURIES: Number of Crew/ Passengers/Staff | | | | | | | |
|  | | **Crew** | **Passengers** | **Staff** |  | **Minor** | **Moderate** | **Serious** |
| **Fatalities** | | Type | Type | Type | **Major Injury** | Type | Type | Type |
| **Serious Injury** | | Type | Type | Type | **First Aid** | Type | Type | Type |
| **Missing** | | Type | Type | Type |  | Type | Type | Type |

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| **6** | **CIRCULATION OF INFORMATION** | | | | | | | |
| **Pilots** | |  | **Ship Agent** |  | **NIEA** |  | **Fire Brigade** |  |
| **Work Dept** | |  | **UKHO/CIL** |  | **Royal Navy NI** |  | **Marine Services** |  |
| **MCA** | |  | **MAIB** |  | **Police** |  | **Ship Owner** |  |
| **Coastguard** | |  | **PEC Holders** |  | **Ambulance** |  |  |  |

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| **7** | **Category** | | | | | | | |
| **Debris** | |  | **Pilotage** |  | **Conservancy** |  | **Navigation** |  |
| **Marine Services** | |  | **Recreational** |  | **Others** |  |  |  |
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| 8 | **INVESTIGATION FINDINGS** |
| Click here to enter text. | |

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| 9 | **FOLLOW UP ACTIONS** | **Action By** | **Action Date** | **Signoff Date** |
| None | | Choose an item. | Click | Click |

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| 10 | **RECOMMENDED CHANGES TO PSMS** |
| None | |

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| 10 | **SIGN OFF** | |
| Signature Choose an item. | | Date: Click here to enter a date. |