

Report of an incident or “close call” –situation

What and when happened: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Were humans in danger, how: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Were any equipment damaged, how: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

How would this incident have been avoided, suggestions for improvements: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

|                      |  |
|----------------------|--|
| Date:                |  |
| Printed name:        |  |
| Signature:           |  |
| Contact information: |  |

This form should be delivered to AMI Centre personnel, Otakaari 5 I, 2<sup>nd</sup> floor, room IM213 or IM212.