

Report of an accident not at a level crossing

Filling in this form

Use one form to report a train accident involving a number of casualties. Attach a list of additional casualties to this form, giving all the details asked for in Part C.

Part A

About you

1 What is your full name?

2 What is your job title?

3 What is your telephone number?

About your organisation

4 What is the name of your organisation?

5 What is its address and postcode?

6 What is the organisation's business? (please tick)

- railway operator contractor
 minor railway other – please specify

7 What is the railway reference number?

Part B

About the accident

1 On what date did the accident happen?

2 At what time did the accident happen? (Please use the 24-hour clock eg 0600)

3 Where did the accident happen?

4 Describe the line or location at the time of the accident

5 What was the line category?

6 Describe any other line obstructed by the accident

7 Give the number of the dangerous occurrence you are reporting (the numbers are in the Regulations)

Part C

About the injured person

1 What is their full name?

2 What is their home address and postcode?

3 How old are they?

4 Are they male? female?

5 Are they:-

an employee of your organisation?

What is their job title

- contractor ? person on business?
 passenger? trespasser?
 person on property other – please specify

Part D

About the injury

1 What was the injury? (eg fracture, laceration)

2 What part of the body was injured?

- 3 Was the injury (tick all the boxes that apply)
- a fatality
 - a major injury or condition? (see guidance notes)
 - an injury to an employee or self-employed person which prevented them doing their normal work for more than 3 days?
 - an injury to the public which meant that they had to be taken from the scene of the accident to a hospital for treatment?

Part E

About the kind of accident

Please tick one box that best describes what happened

Train accident

- Collision
- Derailment
- Running into obstruction
- Fire
- Other

Failure

- Rolling stock
- Permanent way etc

Accidents to passengers involving trains

- Getting on or off trains
- Opening or closing carriage doors
- Falling out of carriages while train is moving
- Falling off a platform and being struck or run over by a train
- Crossing the lines at stations
- Other

Other accidents to passengers

- Using stairs and escalators at stations
- Falling off a platform onto the line
- Slipping, tripping or falling on the same level
- Being struck by barrows, falling over packages etc
- Electric shock on electrified railways
- Other

Accidents to other people

- Person on business
- Person on property

Accidents to railway employees and contractors involving moving trains

- Shunting accident
- Accident during the running of trains
- Accident to staff working on or near the track
- Other

Other accidents to railway employees and contractors

- Contact with moving machinery or material being machined
- Struck by a moving object (including flying or falling objects) but not rails
- Struck by a moving vehicle but not a rail vehicle
- Struck against something fixed or stationary
- Injured while handling, lifting or carrying things other than rails
- Falling more than 2 metres
- Falling less than 2 metres
- Falling from a stationary rail vehicle
- Slipping, tripping or falling on the same level
- Trapped by something collapsing or overturning
- Burnt or scalded but not by chemical or electrical agents
- Using power-driven hand tools
- Using unpowered hand tools
- Handling rails by manual or mechanical means
- Electric shock or burns from plant or equipment
- Electric shock or burns from live rail on electrified lines
- Electric shocks or burns from overhead electrification equipment
- Harmed by lack of oxygen
- Injured by explosion
- Contact with or exposure to harmful substance
- Assaulted while on duty
- Other

Part F

About the train(s) involved in the incident

1 What is the reporting number?

2 What were the time and place of origin?

3 What was the place of destination?

4 What speed was the train travelling at?

5 What type of train was it? (Give the locomotive and unit details where possible)

Part G

Delays to service

1 What lines were affected?

2 For how long were services delayed?

From	to
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Part H

Describing the accident

Please use a separate sheet of paper to describe the accident.

Give as much details as you can.

Part I

Your signature

Signature

Date

Please continue on this page if necessary