|  |  |
| --- | --- |
| **Vessel details** | |
| Describe the incident: Who, what, when, where and how—what happened? | |
| What created the risk? | |
| What actions have you taken to prevent similar incidents in the future? | |
| **Risk assessment** | |
| Did similar incidents occur previously? | Yes  No |
| Was risk assessment conducted for this activity? | Yes  No |
| Did the risk assessment highlight any concerns with the activity? | Yes  No |
| Risk assessment reviewed? | Yes  No |