

Form
See rule 3(1)
Intimation of Accident

1. Date and time of accident:
2. Place of accident (Village/ Town, Tehsil /Thana and District):
3. Type of Accident: Fatal/Non-Fatal:
4. System and voltage of supply (Whether Extra High Voltage (EHV)/High Voltage(HV)/Medium Voltage(MV)/Low Voltage(LV),Line, substation/ generation station/ consumer's installation/ service lines/ other installations) :
5. Designation of the officer-in-charge of the generating company/ licensee/in whose jurisdiction the accident occurred:
6. Name of owner/user of energy in whose premises the accident occurred.
7. Details of victim (s):

(A) Human:

- (i) name
- (ii) address
- (iii) sex
- (v) approximate age

(B) Animal:

- (i) description of animal(s)
- (ii) number(s)

8. In case the victim(s) is fare employee(s)of supplier/licensee:
 - (a) designation of such person(s)
 - (b) brief description of the job undertaken! if any
 - (c)whether specific permit-to-work on lines was taken or not (Yes or No)
 - (d)whether the permit-to-work was for Charged or non-charged lines? (Yes

or No)

9. Causes leading to the accident:

10. Whether the incident is reported to concerned Police Station? If yes, give name of concerned Police Station:

11. What safety equipment were given to or used by the person(s) who met with the accident? Please tick:

Name of Safety Equipment	Provided to the person who met with Accident	
	Yes	No
Rubber gloves		
Mats		
Safety belts		
Ladders		
Others		

12. Names and designations of persons present at, and witnessed, the accident.

a. b.

c. d.

13. Any other information/remarks.

Place Signature

Time Name

Date..... Designation and Address of the Person reporting

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