

FORMEE
[See Rule 11]
REPORT OF FATAL ACCIDENTS

To

.....

.....

Sir,

I have the honour to submit the following report on an accident which occurred on
.....at..... and which resulted in the death of the
workman/workmen of whom particulars are given in the statement annexed.

2. The circumstances attending the "death of the workman/workmen were as under :-
- (a) Time of the accident
 - (b) Place where the accident occurred
 - (c) Manner in which deceased was/were employed at the time
 - (d) Cause of the accident
 - (e) Any other relevant particulars I have etc.

Signature and designation of the person making the report.

Statement

Name	Sex	Age	Nature of employment	Fill Postal address
------	-----	-----	----------------------	---------------------