

Form No.18A
(Prescribed under Rule 96)

(Vide para 2 of Schedule Under Rule 96)

(Notice of dangerous occurrence which does not result in death or Bodily injury).

1. Name and address of the factory :

2. Name of the Occupier :
3. Name of the Manager :
4. Nature of Industry :
5. Branch or Department and exact place :
where the dangerous occurrence took place
6. Date and Hour of occurrence :
(State exactly what happened)

I certify that, to the best of knowledge and belief the above particulars are correct in every respect.

Signature of the Occupier /Manager
Date of dispatch of Report.....

Note:- To be completed in legible handwriting or preferably typewritten. (This space to be completed by Inspector of Factories).

District

Date of receipt

D.O.No.

Date of Investigation

Causation No.

Result of Investigation