

**SYDNEY TRAMWAY MUSEUM
OCCURRENCE REPORT**

Ref No.

Reported By: (Please print) Membership No.:

Signature: Date:

Please tick box

NOTE: *One incident per form only please*

TRAFFIC RELATED *[Tramcar operations, traffic safety, etc]*
NB. If the incident is serious or injuries occur, phone the Operations Manager or a Society Director immediately

Time: Driver's Name: Membership No.:

Weather: Conductor's Name: Membership No.:

Observer's Name: Membership No.:

Were any tram services affected: If so, which:

INFRASTRUCTURE RELATED - Complete details on page 2 *[Track, Overhead, drains, etc]*

LEVEL CROSSING - Complete details on page 2 *[Faults and failures]*

CUSTOMER COMPLAINT - - Complete details on page 2

OTHER - Complete details on page 2 *[Any other, Locks sticking, taps leaking, etc]*

MISS **NEAR MISS** **COLLISION AT LEVEL CROSSINGS**

**FIRST COMPLETE THE DETAILS IN THE "TRAFFIC RELATED" SECTION ABOVE
(TO BE PHONED THROUGH TO IAN SAXON 0438662942 or MATTHEW GEIER ON
0412473300 ASAP)**

*(Miss defined as a vehicle not stopping at the STOP sign and crossed more than 1 pole length in front of the tram)
(Near Miss defined as having to apply emergency braking and/or was within 10 metres of the front of the tram)*

The details required are: Name of Crossing: _____

Date of Incident: _____ Time of Incident: _____

Tram Number: _____ Direction of Travel – NORTH or SOUTH.

Other Vehicle Details:

Vehicle Registration No. _____ Direction of Travel – EAST or WEST

Description of vehicle: - Colour _____ Police Notified: yes / no

Make of vehicle _____

Injuries: Number of people: _____ Type of Injury: _____

Details of Witnesses:

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Details of Action Taken By Crew To Avoid Collision or Minimise Impact:

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Continue over the page

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Assessed By		Date	
ACTIONS		Who will do?	Due By Date:
			Completed? (Yes/No)
Risk: With future controls in place, what is the remaining risk? <u>Acceptable</u>			<u>Not Acceptable</u>
Consequence (A to D) ____ + Likelihood (1 to 5) ____ = Risk (circle) <u>Med, Low</u>			<u>High</u>
<i>If the risk is M or higher, then this risk must be added to the risk and hazard registers.</i>			

** Please use additional sheet if required.
 Leave this report in the Traffic Office report box. Make a copy of this report for your file if required.

OFFICE USE ONLY

Report Received: Reference No.: (Copy to front of form)