



Discovery Insurance Company
P.O. Box 200 • Kinston, NC 28502
800-658-1492

Accident Investigation Report

_____ Incident _____ Medical _____ Lost Time

Facility of: _____

Employee's Full Name: _____ Social Security #: _____

Employee's Address: _____

Phone Number: _____
Street City State Zip

Date of Birth: ____/____/____ Date of Hire: ____/____/____

Wages per Hour: _____ Weekly Wage including overtime/shift differential: _____

Job Title: _____ Date of Accident: _____ Time of Accident: _____ ☐ am ☐ pm

Location of Accident: _____

Cause of Accident (*describe in detail*): _____

Describe accident in detail: _____

1) Did employee use proper lift? ☐ yes ☐ no

2) Was employee wearing proper shoes? ☐ yes ☐ no

3) Did employee use protective gear? ☐ yes ☐ no

Employee was working ____ alone; ____ with crew or fellow worker; ____ other/explain _____

Supervision at time of incident: ____ directly supervised, ____ indirectly supervised; ____ not supervised;

____ Supervision not feasible; and why _____

Type of Injury Received (*describe in detail*) including body part: _____

Witnesses? If so, give name(s): _____

Employee Signature: _____ Date: ____/____/____

What unsafe act/unsafe condition contributed to this accident: _____

What can be done to prevent future incidents/accidents of this type: _____

What corrective measures have been taken to prevent future accidents: _____

Date Accident was reported to supervisor: ____/____/____

Signature of Supervisor: _____ Date Prepared: ____/____/____

Signature of Administrator: _____ Date Prepared: ____/____/____

REMEMBER EVERY ACCIDENT HAS A CAUSE!!!! CARELESSNESS IS NOT CAUSE, BUT THE RESULT OF SOME DEFICIENCY (UNSAFE ACT OR CONDITION). ONCE YOU HAVE DETERMINED WHAT CAUSES CONTRIBUTED TO THE ACCIDENT, SUITABLE CORRECTIVE ACTION SHOULD BE TAKEN TO PREVENT REOCCURRENCE. THIS COMPANY IS A DRUG-FREE WORKPLACE!!! PLEASE FOLLOW DRUG TESTING POLICY ACCORDINGLY!

Mail the original of this form to Discovery Insurance Company, P.O. Box 200, Kinston, NC 28502.

Questions, please dial (252) 523-1200, Extension 4195.

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