

**RAY International Electrical Equipments Maintenance LLC** 

**RAY International Electrical Contracting LLC** 

**RAY International Power LLC** 

## **INCIDENT NOTIFICATION**

To be reported within 24 hours (maximum)

Abudhabi/ Dubai

DISTRIBUTIONTo: MD, CEO, GMs, Dis	scipline SR M	GR, Qhse mGR & advisors, LINE managers, HRA mANAGER									
REPORT ORIGINAT	•										_
NAME:	COMPANY / DIVISION:				GSM NO: CUG:						
LOCATION OF INCIDE	NT:		DATE OF INCIDENT:			ТІМ	E:				
INCIDENT TYPE: (TICK MARK THE AP	PPLICABLE)	Near Miss / Fist Aid Case / Restricted Wo Damage/Traffic Accident/Roll Over	rk / Medically treated / Los	st Time Injur	y / Fatality / Occup	ational Illnes	s / Asset dan	nage / Enviro	onment		
	RITY RATING:	TING:  to determine the <b>actual</b> and <b>potential</b> severity rating for the	ncident. Seek assistance from the		Likelihood Severity	Rare (1)	Unlikely (2)	Possible (3)	Likely (4)	Almost Certain (5)	
HSE Advisor if required.  Incidents with a potential 'Medium or High Risk' shall be referred to the RAY QHSE Dept immediately					Catastrophic (5) Low		Moderate	High	High	High	
including with a poc	certair Fredian	or right task shall be referred to the taxt Quibe pept immediately			Major (4)	Low	Moderate	Moderate	High	High	
LOW MED HIGH					Moderate (3)	Low	Moderate	Moderate	Moderate	High	
					Minor (2)	Low	Moderate	Moderate	Moderate	Moderate	
(Please click and drag circle for correct rating)					Negligible (1)	Low	Low	Low	Low	Low	
			BRIEF DESCRIPTION O	F INCIDENT							-
			BRIEF DESCRIPTION OF	DAMAGE							
NUMBER OF PERSO	ONS INJURED:										
NAMES OF INJURED	D PEOPLE AND	DETAILS OF INJURIES.									
			THE FOLLOWING FOR <u>LOW PO</u>			pleted)					
IMMEDIATE CAUSES	s										
UNDERLYING CAUS	ES										
CORRECTIVE AND PREVENTIVE ACTIONS:				RESPONSIBLE:			CLOSED DATE:				
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