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RAY International Electrical Equipments Maintenance LLC

RAY International Electrical Contracting LLC

To be reported within 24 hours (maximum)

RAY International Power LLC

INCIDENT NOTIFICATION

Abudhabi/ Dubai

| DISTRIBUTIONT MD, CEO, GMs, | | SR MGR, Qhse mGR & | advisors, LINE manager | rs, HRA mA | NAGER | | | | | | |
|--|-----------|--|------------------------|-------------|------------------------|-----------------|----------------|-----------------|------------|--------------------------|---|
| REPORT ORIGIN | NATED BY: | trees | saSang | | | | | | | | |
| NAME: 23-03-00012 | | COMPANY / DIVISION: ABU DHABI-COM-RESC | | | DURC | GSM NO: CUG: | 0 | | | | |
| LOCATION OF INCIDENT: tr25/03/2023 ec | | DATE OF INCIDENT: | | 25-03-2023 | | TIME: | 12:0 | 12:02 PM | | | |
| INCIDENT TYPE: (TICK MARK THE APPLICABLE) Near Miss / Fist Aid Case / Restricted Work / Medically treated / Lost Time Injury / Fatality / Occupational Illness / Asset damage / Environment Damage/Traffic Accident/Roll Over | | | | | | | | | | | |
| INCIDENT ACTUAL SEVERITY RATING: POTENTIAL SEVERITY RATING: Note: Use the Risk Assessment Matrix to determine the actual and potential severity rating for the incident. Seek assistance from the HSE Advisor if required. | | | | severity | Likelihood Severity | Rare (1 | Unlikely (2) | Possible (3) | Likely (4) | Almost Certain (5) | |
| Incidents with a potential 'Medium or High Risk' shall be referred to the | | | | | Catastrophic (5) | Low | Moderate | High | High | High | |
| RAY QHSE Dept immediately LOW MED HIGH | | | | | Major (4) | Low | Moderate | Moderate | High | High | |
| | | | | | Moderate (3) | Low | Moderate | Moderate | Moderate | High | |
| (Please click and drag circle for correct rating) | | | | | Minor (2) | Low | Moderate | Moderate | Moderate | Moderate | 2 |
| | | | | | Negligible (1) | Low | Low | Low | Low | Low | |
| | | | BRIEF | DESCRIPTION | ION OF INCIDENT | | | | | | |
| fe | | | | | | | | | | | |
| | | | BRIE | F DESCRIPT | TON OF DAMAGE | | | | | | |
| gr | | | | | | | | | | | |
| NUMBER OF PERSONS INJURED: 6 | | | | | | | | | | | |
| NAMES OF INJURED PEOPLE AND DETAILS OF INJURIES. Vd | | | | | | | | | | | |
| | | (All incidents in | THE FOLLOWIN | | W POTENTIAL INCID | | n report compl | eted) | | | |
| IMMEDIATE CAUSES | | he | | | | | | | | | |
| UNDERLYING CAUSES | | ge | | | | | | | | | |
| | | CORRECTIVE AND | PREVENTIVE ACTIONS: | | | | RESPONSIBLE | : | CL | OSED DATE: | |
| gr | | | | | | Rajase | ekaran Vaithi | yanathar | 457 | | |

| Ref No: RAY-IMS-FR-627 | Version. No | 01 | Issued Date | 3/25/2023 | Page No: | Page 1 of 1 |
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