



THE WIELAND-DAVCO CORPORATION

4162 English Oak Drive, Lansing, MI 48911

Phone: 517-372-8650 Fax: 517-372-8961

SUPERVISOR'S REPORT OF INJURY/ACCIDENT

This report is to be completed and distributed within 24 hours of Physical Injury/Accident.

I. EMPLOYEE DATA

1. SOCIAL SECURITY NUMBER	2. EMPLOYEE NAME (LAST, FIRST, MI)	3. JOB POSITION/TITLE
4. DATE OF INJURY	5. EMPLOYER NAME	6. SUPERVISOR'S NAME

II. ALLEGED INJURY DATA

7. WORKDAYS LOST:	8. LAST DAY WORKED	9. DATE EMPLOYEE RETURNED TO WORK (IF APPLICABLE)	10. DID EMPLOYEE DIE? YES / NO
11. INJURY CITY	12. INJURY STATE	13. INJURY COUNTY	
14. DID INJURY OCCUR ON EMPLOYER'S PREMISES? (YES / NO) (IF NO, SEE ITEM #15.)		15. PROVIDE NAME OF JOBSITE WHERE INJURY OCCURRED	
16. NAME(S) OF WITNESSES:			
17. DESCRIBE THE NATURE OF INJURY OR ILLNESS (EXAMPLE: AMPUTATION, BURN, CUT, FRACTURE)			
18. PART OF BODY DIRECTLY AFFECTED BY THE INJURY OR ILLNESS (EXAMPLE: HAND, ARM, CIRCULATORY SYSTEM)			
19. DESCRIBE THE EVENTS WHICH CAUSED THE INJURY (EXAMPLE: FELL, OPERATING MACHINES, CHEMICAL EXPOSURE)			
20. NAME THE OBJECT OR SUBSTANCE WHICH DIRECTLY INJURED THE EMPLOYEE (EXAMPLE: KNIFE, ACID, FLOOR, OIL)			
21. DID ACCIDENT RESULT IN PROPERTY DAMAGE?			
22. DESCRIBE THE SURROUNDING AREA AT THE ACCIDENT. (EXAMPLE: WEST EDGE OF SITE, GRINDER PIT #1 TRENCH – BE AS SPECIFIC AS POSSIBLE.)			
23. WAS FIRST AID GIVEN? (YES / NO) (IF YES, BY WHOM)			
24. WAS MEDICAL TREATMENT REQUIRED (MORE THAN FIRST AID)?			
25. WHAT ACTIONS, EVENTS, OR CONDITIONS CONTRIBUTED MOST DIRECTLY TO THIS ACCIDENT?			
26. PRIOR TO THIS ACCIDENT, WERE ANY INCIDENTS OR NEAR MISSES REPORTED? IF SO, DESCRIBE THE INCIDENT AND THE DATES THEY WERE REPORTED.			
27. COULD ANYTHING BE DONE TO PREVENT ACCIDENTS OF THIS TYPE? IF SO, WHAT?			

III. PREPARER DATA

28. DATE INJURY REPORTED TO YOU	29. TIME INJURY REPORTED TO YOU	30. PREPARER'S NAME
31. PREPARER'S TITLE	32. TELEPHONE NUMBER	33. DATE PREPARED

cc: Rob Krueger, VP Operations
Project Manager
Maureen Devota, Controller
Rhonda Every, Executive Assistant

Preparer's Signature
The Wieland-Davco Corporation