

72 Hour Ferry Incident Investigation Report

Incident Details

Incident date & time		OTSI Reference no.	
Incident location			
Environmental Conditions			

Brief incident description:

Operator Details

Operating Company		Vessel Name	
Regular Passenger Service <input type="checkbox"/> Charter Service <input type="checkbox"/>			

Vessel Details

NSW Maritime Survey No.		Vessel length	
Nature of operation at time of incident		Passenger Capacity	

Police notified	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Police attendance	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Police Officer name			Police Contact Number		
Police Station			Police Event Number		
OTSI notified (1800 - 677 - 766)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	OTSI Contact Person		
Date OTSI notified			Time OTSI notified		

Passenger details

Number of passengers aboard at the time of incident / accident	
Number of crew aboard at the time of the incident / accident	

Details of any casualties

Name	Contact Number	Injury Type



Investigation Facts:	<ul style="list-style-type: none"> ▪ Record the key events and actions, leading up to and those which occurred as a result of the incident/accident, in chronological order. ▪ Include the time of the event or action. 	
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
What actions were taken to prevent the situation from becoming worse. (Remedial action at time of incident) eg Passenger Management, Requests for assistance.	Action by:	Date
1.		
2.		
3		
4		
5		
What measures have been or are being taken to prevent recurrence of similar incidents in the future. (Preventative action) eg new standard operating procedures (SOPs), upgraded equipment.	Action by:	Date
1.		
2.		
3		
4		
PLEASE EMAIL / FAX REPORT TO OTSI WITHIN 72 HOURS OF REQUEST:		
Email: transport.safety@otsi.nsw.gov.au or Fax: (02) 9322-9299		
Report prepared by:	Report forwarded by:	
Name:	Name:	
Date:	Date:	
Phone:	Phone:	