



## EMPLOYER'S NOTICE OF INJURY FORM

**EMPLOYER** .....

Address .....

Nature of Business .....

Tel. No. .... Site Tel. No. (Where Applicable) .....

**EMPLOYEE** (Name in Full) .....

Address (in full) .....

Usual Occupation .....

Single or Married ..... Is he or she in your direct employ? .....

If not state the name and address of Sub-Contractor .....

State date he/she entered your employ ..... M.N.I. No. ....

**ACCIDENT** Date ..... Time <sup>A.M.</sup><sub>P.M.</sub> ..... Place .....

To whom reported ..... When reported: Date ..... time <sup>A.M.</sup><sub>P.M.</sub> .....  
i.e. Dept or Site

On what work was the employee  
Engaged at time of accident? .....

Was the injured person performing a  
Duty for which he/she was employed? .....

Was the accident due to any breakdown or  
Defect in ways, works, machinery or plant? .....

Who was in charge  
At time of accident? ..... In what capacity .....

Describe fully how the accident occurred .....

If accident was caused by machinery  
Describe type and make .....

If thought necessary, a rough sketch or diagram overleaf would be helpful.

**INJURIES** Nature and extent .....

Date employee ceased work ..... Estimated period of incapacity .....

If taken to hospital, state name and  
Address thereof and whether detained .....

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WITNESSES Give names and addresses .....

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**EARNINGS**

Give a list of earnings of the injured person during the 3 months prior to the date of the accident below.

NOTE: This information is only required when injured person is likely to be totally incapacitated for a period in excess of 14 days.

Date .....Employer's Signature.....

Title of person signing this form .....

NOTE: This form is issued to enable Underwriters to deal with any claim which might arise, and it is therefore essential that the questions asked be fully and accurately answered.

<b>Week Ending</b>	<b>1. Gross Wage</b> <b>£</b>	<b>2. Net Wage</b> <b>£</b>	<b>3. Subsistence or Lodging allowance if any</b> <b>£</b>
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			

NOTES: Wages given should not include allowances entered into column 3

SKETCH (if applicable)