

# INCIDENT INVESTIGATION SUMMARY

<b>Facility name:</b>	
<b>Date of incident:</b>	<b>Date investigation began:</b>
<b>Description of the incident:</b>	
<b>Personnel involved (name/title):</b> <i>(include resulting or potential injuries/damage)</i>	
<b>Chemical released:</b>	<b>CAS #:</b>
<b>Estimated duration of release:</b>	<b>Estimated quantity released:</b>
<b>Contributing factors:</b> <i>(consider human error, equipment failure, training adequacy, and/or procedure adequacy)</i>	

**Recommendations  
& Corrective  
Actions**

*List each recommendation that resulted from the investigation, for each recommendation complete the following table (all recommendations must be resolved to complete the investigation)*

<b>Description of Recommendations, Correction Action and Intent</b>	<b>Assigned to:</b>	<b>Target Date</b>	<b>Date Resolved</b>	<b>Resolution/Comments</b>

*Each incident which resulted in, or could reasonably have resulted in a catastrophic release shall be investigated. The following personnel participated in an incident investigation for such a situation.*

Name	Position	Date/Time

**Incident Investigation Review with Personnel**

*The findings of the incident investigation have been reviewed with all the following affected personnel whose job tasks are affected by the findings.*

\_\_\_\_\_ Date

\_\_\_\_\_ Person who reviewed the findings with personnel

Date	Name	Position	Area of Expertise