

PAPUA NEW GUINEA.
Mining (Safety) Act 1977.

Reg., Sec. 171 and 358(1)(a). Form 14.

REPORT OF ACCIDENT CAUSING BODILY INJURY.

I report that an accident occurred in the (*insert part of mine or works*) of (*name and address of mine or works*) on, 20 , at am/pm when the person in charge was (*name*) and that the particulars of the accident are as follows:—

Injured person's—			Result of injury (<i>fatal or non-fatal</i>)	Description of non-fatal injury	What done with injured (<i>treated locally, sent to hospital, etc</i>)	Name of doctor attending	Cause of accident (<i>if explosion, name of explosive to be given</i>)
Full name	Age	Status (<i>married or single</i>)					

Dated at, 20 .

Owner (*or Agent, or Manager*),