

[FORM 24A]

(See rule 115)

**Notice of Dangerous Occurrence**

1	Name & Address of Factory	
2	Name & Address of the Occupier	
3	Name & Address of the Manager	
4	Nature of Industry	
5	Branch or Department and exact place where the dangerous occurrence took place	
6	Date & Hour of Occurrence	
7	Nature of Dangerous occurrence (State Exactly what happened)	

I certify that to the best of my knowledge and belief, the above particulars are correct in every respect.

PLACE:

Date of despatch of report

Signature of the Occupier/Manager

District

Date of Receipt

Dangerous Occurrence Number \_\_\_\_\_ Date of investigation

Causation Number \_\_\_\_\_

Result of Investigation \_\_\_\_\_