



BCHC Incident Report

Must be Submitted to the BCHC Safety Chairs:

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Reporting Date:
Date of Incident:
Person Reporting Incident
Activity (example: Chainsaw, Crosscut Saw, Packing):
Operator's Saw Certification Level:
Description of Incident (what happened?): Attach additional paper if needed.
Was there an Injury? Yes or no:
Name of Person (s) Injured:
Extent of injury:

Name(s) of Witness(s)

Assessment of cause:

Review Committee comments:

Corrective Action suggested by committee:

Date of ICAC Review: