

AUSTRALIAN POWER BOAT ASSOCIATION

National Authority Affiliated with the Union International Mononautique

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INCIDENT REPORT

VENUE:	
CLUB:	
DATE:	
BOATS INVOLVED:	
1:	
2:	
3:	
Fill out this form when an incident occurs. Please ensure that all questions are completed.	

SAFETY OFFICER USE ONLY Driver Error Water Conditions Mechanical Fault Hull Failure Unable to Determine Other (please specify)

CLUB CHECK LIST		
Boat Report for Each Boat involved		
Scrutineering Form for Each Boat involved		
Driver Statement(s)		
Rescue Personnel Statement(s)		
Witness Statement(s)		
Videos/Photographs		

INCIDENT REPORT

This form has been designed to give information and to suit a number of situations. Include any information that you feel is also relevant, on a separate sheet if necessary. Some information asked for may seem unnecessary, but it may enable us to pick out any trends occurring.

A boat report form AND a copy of the scrutineering form MUST accompany this report for each boat involved in an incident.

Person making report:	Position held:	
Contact phone number(s):		
Venue:	Date:	Time:
Club conducting event:		
Relative to the boat(s), from where was	any wind blowing and how strong was it?:	
Water conditions: Calm: () Cho	ppy: () Rough: () Very Rough: ()	Sloppy: ()
Other (specify):		
Was visibility hampered by sun, rain, fog	g, exhaust haze, etc?	
Number of boats in race:	Class of race (H'cap, 6 litre, etc	:
Number of boats involved in the inciden	t:	
BOAT 1		
Boat Name:	SBA Rego:	Expiry date:
Owner Name & Address:		
Contact Number:	APBA owners Licence Number:	
SBA licence Number:	Expiry Date:	state of issue:
Driver Name & Address:		
Contact Number:	APBA Drivers Licence number:	
SBA licence number:	Expiry date:	state of issue:
BOAT 2		
Boat Name:	SBA Rego:	Expiry date:
Owner Name & Address:		
Contact Number:	APBA owners Licence Number:	
SBA licence Number:	Expiry Date:	state of issue:
Driver Name & Address:		
Contact Number:	APBA Drivers Licence number:	
SBA licence number:	Expiry date:	state of issue:
BOAT 3		
Boat Name:	SBA Rego:	Expiry date:
Owner Name & Address:		
Contact Number:	APBA owners Licence Number:	
SBA licence Number:	Expiry Date:	state of issue:
Driver Name & Address:		
Contact Number:	APBA Drivers Licence number:	
SBA licence number:	Expiry date:	state of issue:

DETAILS OF INCIDENT:	
HOW LONG DID IT TAKE FOR THE RESCUE PERSONNEL TO REACH THE DRIVER(S):	
DESCRIBE IN DETAIL, THE RECOVERY AND RESCUE:	
DESCRIBE IN SETALS, THE RECOVERT AND RESCOEL	
WERE THERE ANY PROBLEMS DURING THE RESCUE AND/OR RECOVERY?	

PLEASE ENCLOSE COPIES OF ANY DRIVER, RESCUE PERSONNEL, OR EYEWITNESS REPORTS OR STATEMENTS, VIDEOS OR PHOTOGRAPHS OF THE INCIDENT OR OF THE BOATS INVOLVED.

IS THE RACE COMMITTEE ABLE TO DETERMINE THE CAUSE OF THE INCIDENT, IF SO, PLEASE GIVE DETAILS?		
DIAGRAM OF	INCIDENT	
In this space (or on a separate sheet) please make a diagram of the co features (competing boats, rescue craft, dive boats, shoreline, turning arrows to indicate their course during the incident.		
Vere any separate sheets included with this report:	If so how many	
	If so, how many:	
Vere any photographs included with this report:	If so, how many:	
Vere any video tapes included with this report:	If so, how many:	