

Transport Safety Hazard & Near-Miss Report

Record the facts and immediate safety actions. Use your organisation's reporting and escalation process. Do not include unnecessary sensitive personal information. Make the situation safe, report facts promptly, investigate underlying causes, assign corrective actions and verify effectiveness before closing. Record only personal details necessary for the investigation.

English · CoR Australia branded · editable for your operation

Date / time: _____
 Location / task: _____
 Reporter / safety contact: _____
 Organisation / business unit: _____
 Report reference: _____
 Incident / near-miss / hazard classification: _____
 Immediate supervisor: _____
 Investigation owner: _____
 Action due date: _____
 Close-out approver / date: _____
 Document version: _____
 Prepared by / date: _____
 Approved by / date: _____
 Next review / change trigger: _____

☐ What happened or could have happened?

Status: Yes / Gap / N/A _____ Evidence / reference: _____
 Action / owner / due date: _____ Verified by / date: _____

☐ People / vehicles / equipment involved (only necessary details)

Status: Yes / Gap / N/A _____ Evidence / reference: _____
 Action / owner / due date: _____ Verified by / date: _____

☐ Hazard: speed, fatigue, loading, vehicle condition or other

Status: Yes / Gap / N/A _____ Evidence / reference: _____
 Action / owner / due date: _____ Verified by / date: _____

☐ Immediate action to make the situation safe

Status: Yes / Gap / N/A _____ Evidence / reference: _____
 Action / owner / due date: _____ Verified by / date: _____

☐ Who was notified and when?

Status: Yes / Gap / N/A _____ Evidence / reference: _____
 Action / owner / due date: _____ Verified by / date: _____

☐ Evidence / photographs / records reference

Status: Yes / Gap / N/A _____ Evidence / reference: _____
 Action / owner / due date: _____ Verified by / date: _____

☐ Proposed control or safe alternative

Status: Yes / Gap / N/A _____ Evidence / reference: _____
 Action / owner / due date: _____ Verified by / date: _____

☐ Investigation owner and due date

Status: Yes / Gap / N/A _____ Evidence / reference: _____
 Action / owner / due date: _____ Verified by / date: _____

☐ **Corrective action agreed**

Status: Yes / Gap / N/A _____ Evidence / reference: _____
Action / owner / due date: _____ Verified by / date: _____

☐ **Verification of control effectiveness**

Status: Yes / Gap / N/A _____ Evidence / reference: _____
Action / owner / due date: _____ Verified by / date: _____

☐ **Feedback to the reporter**

Status: Yes / Gap / N/A _____ Evidence / reference: _____
Action / owner / due date: _____ Verified by / date: _____

☐ **Review and close-out date**

Status: Yes / Gap / N/A _____ Evidence / reference: _____
Action / owner / due date: _____ Verified by / date: _____

☐ **Record sequence of events, relevant conditions and what was observed; distinguish facts from assumptions.**

Status: Yes / Gap / N/A _____ Evidence / reference: _____
Action / owner / due date: _____ Verified by / date: _____

☐ **Identify affected duty-holder interfaces, including scheduling, loading, contracts or vehicle condition.**

Status: Yes / Gap / N/A _____ Evidence / reference: _____
Action / owner / due date: _____ Verified by / date: _____

☐ **Record the immediate safe action and whether work or dispatch was paused.**

Status: Yes / Gap / N/A _____ Evidence / reference: _____
Action / owner / due date: _____ Verified by / date: _____

☐ **Preserve relevant records/photographs safely and record evidence references, not unnecessary sensitive information.**

Status: Yes / Gap / N/A _____ Evidence / reference: _____
Action / owner / due date: _____ Verified by / date: _____

☐ **Record who was notified and consider applicable external notification duties with competent advice.**

Status: Yes / Gap / N/A _____ Evidence / reference: _____
Action / owner / due date: _____ Verified by / date: _____

☐ **Interview relevant people and identify system causes such as workload, unclear responsibilities or commercial pressure.**

Status: Yes / Gap / N/A _____ Evidence / reference: _____
Action / owner / due date: _____ Verified by / date: _____

☐ **Select controls addressing the causes, not merely a reminder or instruction to be more careful.**

Status: Yes / Gap / N/A _____ Evidence / reference: _____
Action / owner / due date: _____ Verified by / date: _____

☐ **Assign each action an owner, deadline and interim control where needed.**

Status: Yes / Gap / N/A _____ Evidence / reference: _____
Action / owner / due date: _____ Verified by / date: _____

☐ **Verify action completion using evidence and check effectiveness in the actual operation.**

Status: Yes / Gap / N/A _____ Evidence / reference: _____
Action / owner / due date: _____ Verified by / date: _____

☐ **Provide feedback to the reporter and relevant workers; escalate overdue or ineffective actions.**

Status: Yes / Gap / N/A _____ Evidence / reference: _____
Action / owner / due date: _____ Verified by / date: _____

☐ **Record closure approval and whether the risk register, training, contract or procedure requires revision.**

Status: Yes / Gap / N/A _____ Evidence / reference: _____
Action / owner / due date: _____ Verified by / date: _____

Close-out and review

Outstanding actions / interim controls: _____

Verification evidence / reviewer / date: _____

Approval / next review date: _____

CoR Australia | 1300 886 092 | info@chainofresponsibility.au | www.chainofresponsibility.au

Independent 2026 NHVR Master Code implementation template. The NHVR Code is guidance on the existing HVNL Primary Duty; it creates no new legal obligations. Adapt and verify before use. Not an NHVR form, audit certificate or proof of compliance. Source: <https://www.nhvr.gov.au/files/media/document/836/ricp-master-code-2026.pdf>