



Deaths or Injuries - Monthly Summary Report

Operator:		Month:		Year:	
Contact Person:		Email:		Phone:	

			Number of Incidents: Each injury must be assigned to one category only					
Facility Name	Type of Facility	Employees/ Contractors/Marine TOTAL HRS	Fatalities FT	Major Injuries MI	Lost Time Injuries of 3 or more days LTI≥3	Lost Time Injuries of 1 or 2 days LTI<3	Medical Treatment Injury MTI	Alternative Duties Injury ADI



Date of Injury (DD/MM/YYYY)	Facility Name	Injury Category Code	Reference No.	Operator's Incident Number or Identified Code	Brief Description of each Injury included in the above table. <i>State clearly if the injury is due to contracting a disease.</i>	Total Number Work Days Lost (MI, LTI)	Total Number Alternative Duties Days (ADI)

Note that under the Western Australian *Petroleum (Submerged Lands) Act 1982*, monthly reports should be supplied to the relevant State Minister through the WA Department of Mines and Petroleum (www.dmirs.wa.gov.au) rather than NOPSEMA.