**Forklift and Industrial Truck**

**Incident Investigation Document**

Issue 2.3

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| --- | --- | --- |
| **Issue** | **Date** | **Changes** |
| 2.0 | 28/03/2020 | Major Revision, reformat and content changes |
| 2.1 | 30/03/2020 | Minor grammar changes ii Guidelines for conducting and Inspection or Investigation  4.1 and 4.2: Added Truck Min/Max Battery Weight, Mast/Pantograph and Variable Capacity rows  7.1: added Dead man switch to ‘other functions’  Appendix A: Included “Is incident notifiable to Authorities?” |
| 2.2 | 06/04/2020 | 4.1.5 Truck 1 Photos – Changed Load Chart(s) to Capacity Plate(s) |
| 2.3 | 17/07/2020 | 4.1 and 4.2: Amended ‘Required Pressure’ to ‘Measured tyre Pressures’ with Left and Right categories |

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Table of Contents

Contents

[SECTION 1: Details of Person Completing Incident Investigation 6](#_Toc33711182)

[SECTION 2: Details of Incident Site 7](#_Toc33711183)

[2.1: Sketch of Incident Scene 7](#_Toc33711184)

[SECTION 3: Details of Person(s) Involved 8](#_Toc33711185)

[3.1: Injured Person 1 8](#_Toc33711186)

[3.2: Injured Person 2 9](#_Toc33711187)

[SECTION 4: Details of Forklift or Industrial Truck 10](#_Toc33711188)

[4.1: Forklift or Industrial Truck 1 10](#_Toc33711189)

[4.2: Forklift or Industrial Truck 2 12](#_Toc33711190)

[SECTION 5: Details of Property Damage 14](#_Toc33711191)

[5.1: Property Damage Observed 14](#_Toc33711192)

[SECTION 6: Details of Transport to Site 15](#_Toc33711193)

[6.1: Transport Company 15](#_Toc33711194)

[SECTION 7: Further Investigation 16](#_Toc33711195)

[7.1: Items Requiring Further Investigation or Examination 16](#_Toc33711196)

[APPENDIX A: Investigation Process and Completion Flow Chart 17](#_Toc33711197)

* 1. **Scope of Document**

This document provides general guidance for investigating forklift and industrial truck related incidents and templates that you may wish to use when investigating incidents involving the following types of industrial trucks as outlined in AS2359.1: 2019 and ISO5053-1:2015.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| Electric Counterbalanced Rider Type, Stand-Up | Electric Three Wheel Trucks, Sit-Down | Electric Counterbalanced Rider, Cushion Tyre, Sit-Down | Electric Counterbalanced Rider, Pneumatic or either Type Tyre, Sit Down | Electric Narrow Aisle  High Lift Straddle |
|  |  |  |  |  |
| Electric Narrow Aisle  Order Picker | Electric Narrow Aisle  Reach Type Outrigger | Electric Narrow Aisle  Side loaders: Platforms | Electric Narrow Aisle  Side loaders: High Lift Pallet | Electric Narrow Aisle  Turret Trucks |
|  |  |  |  |  |
| Electric Narrow Aisle  Low Lift Platform | Electric Narrow Aisle  Low Lift Pallet | Electric Hand  Low Lift Platform | Electric Hand  Low Lift Walkie Pallet | Electric Hand Rider  Tow Tractor |
|  |  |  |  |  |
| Electric Hand Trucks  Low Lift Walkie/Centre Control | Electric Hand Trucks  Reach Type Outrigger | Electric Hand Trucks  High Lift Straddle | Electric Hand Trucks  Single Face Pallet | Electric Hand Trucks  High Lift Platform |
|  |  |  |  |  |
| Electric Hand Trucks  High Lift Counterbalanced | Electric Hand Trucks  Low Lift Walkie/Rider Pallet  and End Control | Internal Combustion Engine  Fork, Counterbalanced,  Cushion Tyre | Internal Combustion Engine  Fork, Counterbalanced,  Pneumatic Tyre | Electric and Internal  Combustion Engine Tractors  Sit Down Rider |
|  |  | Image result for reach stacker drawing" |  |  |
| Vertical Mast Rough Terrain  Forklift Truck | Variable Reach Rough  Terrain Forklift Truck | Reach Stacker  Container Handler | Mast Mounted  Container Handler | Hand Pallet Truck |

1. **Guidelines for conducting an inspection or investigation:**

**Notification to the Authorities**

If the incident is a notifiable incident, then the incident must be notified to the police or the relevant regulatory agency (the **Authorities**) as soon as possible.

**Security**

When there has been an incident, scene preservation is critical to ensuring crucial evidence is not lost, masked or tampered with. Some trucks may provide diagnostic capability, such as “last movement” recording, so do not operate the truck unless absolutely necessary to ensure the safety of the incident site or the safety of the people present at the incident site. If the incident is notifiable to the Authorities, it is a legislative requirement to ensure that the incident site is preserved and is not disturbed until an inspector arrives at the site and directs that it is safe to re-open. Penalties may occur if the scene is not preserved.

Where a truck has been recovered and removed from the incident scene, either to another location at the same site, or to a location away from the site, security of a truck should still be paramount. The truck in whole, or in part, may be used as evidence in any future legal proceedings.

When a truck involved in an incident is being examined/inspected after it has been recovered and removed from the incident scene, security of the truck must be carefully observed and recorded.

Where the incident is notified to an Authority, the incident site can only be re-opened when it is released by the relevant Authority. Where the incident is not notifiable, the scene of the incident should be returned into operation when it is safe to do so and after the relevant data has been collected.

**Before conducting an Incident Investigation**

* Be aware of other groups also conducting investigations such as the Authorities or the Manufacturer.
* Assist where needed and do not hinder the investigation being conducted by Authorities.

**During the Investigation**

* Do not enter areas isolated by Authorities without permission.
* Do not try to operate the truck or disturb the incident site until all observations are complete, permission has been granted by the relevant Authority and it is safe to do so.
* Provide fact-based observations only; no opinions, theories or commentary.
* Take as many photos of the scene as possible to assist with further investigation away from site. Use date stamp on image where possible.
* If you decide to interview witnesses or other people relevant to the incident, please ensure that any witness or person you interview is given the opportunity to have a support person present.

**After the Investigation**

* Do not share sensitive or confidential information without permission.
* Do not provide theories or draw conclusions until all aspects of the incident have been considered.
* Store investigation document(s) and images in a safe place for future reference. Note: the ownership of this document belongs to the writer and/or the person organising the investigation/inspection. Sharing the document is at the discretion of the owner of the document.

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| SECTION 1: Details of Person Completing Incident Investigation | | | | | | | | | | | | | |
| **1.1 Type of Representation** | | | | | | | | | | | | | |
|  |  |  | | | | |  |  | | | | | |
|  |  | **Site Safety Representative** | | | |  |  | **Emergency Service Representative** | | | | | |
|  |  | * Health and Safety Representative | | | |  |  | * Police | | | | | |
|  |  | * Safety Committee | | | |  |  | * Fire | | | | | |
|  |  | * Mines Department | | | |  |  | * Ambulance | | | | | |
|  |  | * Other……………………………………….. | | | |  |  | * Other: ……………………………. | | | | | |
|  |  |  | | | |  |  |  | | | | | |
|  |  | **Owner of Forklift** | | | |  |  | **State or Territory Regulator** | | | | | |
|  |  | * Contractor | | | |  |  | * SafeWork NSW | | | | | |
|  |  | * Rental Company | | | |  |  | * Workplace Health and Safety QLD | | | | | |
|  |  | * Private Owner | | | |  |  | * WorkSafe ACT | | | | | |
|  |  |  | | | |  |  | * WorkSafe NT | | | | | |
|  |  | **Forklift Manufacturer** | | | |  |  | * WorkSafe TAS | | | | | |
|  |  |  | | | |  |  | * WorkSafe VIC | | | | | |
|  |  | **Independent Engineer/Investigator** | | | |  |  | * WorkSafe WA | | | | | |
|  |  |  | | | |  |  |  | | | | | |
|  |  | **Operator at time of Incident** | | | |  |  | **Airport Authority** | | | | | |
|  |  |  | | | |  |  |  | | | | | |
|  |  | **Insurance Investigator** | | | |  |  | **Other** | |  | | |  |
|  |  |  | | | |  |  |  | |  | | |  |
|  |  | **Site user of Forklift (Contractor)** | | | |  |  |  | |  | | |  |
|  |  |  | | | | | | | | | | | |
| **1.2 Investigator Details** | | | | | | | | | | | | | |
| Name | | |  | | | | | | | | | | |
| Organisation | | |  | | | | | | | | | | |
| Address | | |  | | | | | | | | | | |
| Position Title | | |  | | | | | | | | Phone |  | |
| Email | | |  | | | | | | | | Mobile |  | |
| Assisting Persons | | | 1 | Name |  | | | | | | | | |
| Position Title |  | | | | | | | | |
| Phone |  | | | | | | | | |
| Email |  | | | | | | | | |
| 2 | Name |  | | | | | | | | |
| Position Title |  | | | | | | | | |
| Phone |  | | | | | | | | |
| Email |  | | | | | | | | |
| 3 | Name |  | | | | | | | | |
| Position Title |  | | | | | | | | |
| Phone |  | | | | | | | | |
| Email |  | | | | | | | | |
| Investigation Date | | |  | | | | | | Start Time | | | AM / PM | |
| Finish Time | | | AM / PM | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| SECTION 2: Details of Incident Site | | | | | | | |
| Site Name |  | | | | | | |
| Site Address |  | | | | | | |
| Site Contact Person |  | Phone | |  | | | |
| Email |  | Mobile | |  | | | |
| Organisation |  | | | | | | |
| Main Contractor |  | | | | | | |
| Incident Date |  | Time | | AM / PM | | | |
| Incident Location |  | | | | | | |
| Weather Conditions at time of Incident |  | | | | | | |
|  | | | | | | |
| Lighting Condition at time of Incident |  | | | | | | |
|  | | | | | | |
| Ground/Supporting Surface Description |  | | | | | | |
|  | | | | | | |
| 2.1: Sketch of Incident Scene | | | | | | | |
| Sketch the site, truck and property damage in the area below. Note and mark with arrows where necessary. Attach additional pages if required | | | | | | | |
|  | | | | | | | |
| Additional Pages Attached for Site Layout | | |  | YES |  |  | NO |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| SECTION 3: Details of Person(s) Involved | | | | | | | | | | | | | | | | | |
| Fill in the details of the person, or persons involved in the incident. Be sure to note what their involvement was eg. Truck operator, spotter, bystander, etc. Attach additional persons or recount pages if required. | | | | | | | | | | | | | | | | | |
| 3.1: Injured Person 1 | | | | | | | | | | | | | | | | | |
| Person 1 Full Name |  | | | | | | | | | | | | | | | | |
| Address |  | | | | | | | | | | | | | | | | |
| Suburb |  | | | | | | Postcode | |  | | | | | | | | |
| Email |  | | | | | | Phone | |  | | | | | | | | |
| Organisation |  | | | | | | | | | | | | | | | | |
| Usual Role |  | | | | | | | | | | | | | | | | |
| Role During Incident | * Truck Operator – Operating Truck Number (refer Section 4) | | | | | | | | | | * 1 | * 2 | | | * Other: | | |
| * Bystander | | * Spotter/Guide | | * Other: | | | | | | | | | | | | |
| Relevant Training or Qualifications | * Duty of Care | | * HRW Licence: Class\_\_\_\_\_ HRW No:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expiry\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | |
|  | * Familiarisation | | * VOC | * None | | * Other: | | | | | | | | | | | |
| Recount of Incident |  |  | | | | | | | | | | | | | | |  |
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|  | Additional Pages Attached for Person 1 | | | | | | |  | | YES | | |  |  | | NO | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 3.2: Injured Person 2 | | | | | | | | | | | | | | | | | |
| Person 2 Full Name |  | | | | | | | | | | | | | | | | |
| Address |  | | | | | | | | | | | | | | | | |
| Suburb |  | | | | | | Postcode | |  | | | | | | | | |
| Email |  | | | | | | Phone | |  | | | | | | | | |
| Organisation |  | | | | | | | | | | | | | | | | |
| Usual Role |  | | | | | | | | | | | | | | | | |
| Role During Incident | * Truck Operator – Operating Truck Number (refer Section 4) | | | | | | | | | | * 1 | * 2 | | | * Other: | | |
| * Bystander | | * Spotter/Guide | | * Other: | | | | | | | | | | | | |
| Relevant Training or Qualifications | * Duty of Care | | * HRW Licence: Class\_\_\_\_\_ HRW No:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expiry\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | |
|  | * Familiarisation | | * VOC | * None | | * Other: | | | | | | | | | | | |
| Recount of Incident |  |  | | | | | | | | | | | | | | |  |
|  |  |  | | | | | | | | | | | | | | |  |
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|  |  |  | | | | | | | | | | | | | | |  |
|  | Additional Pages Attached for Person 1 | | | | | | |  | | YES | | |  |  | | NO | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| SECTION 4: Details of Forklift or Industrial Truck | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fill in the details of the truck or trucks involved in the incident. Attach additional truck details pages if required. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4.1: Forklift or Industrial Truck 1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Type of Truck  (as per Section i) |  | | | | | | | | | | | | | | | | | | AS/ISO Standard complied to | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| Make |  | | | | | | | | | | | | | | | | | | Variant | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| Model |  | | | | | | | | | | | | | | | | | | Year Model | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| Serial Number |  | | | | | | | | | | | | | | | | | | Unit ID | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| Mast/boom Height |  | | | | | | | | | | | | | | | | | | No. of stages | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| Max Lift Capacity | kg | | | | | | | | | | | | | | | | | | Load Centre | | | | | | | | | | | | | mm | | | | | | | | | | | | | | | | | | | | |
| Drawbar Pull | Newtons | | | | | | | | | | | | | | | | | | Max Towed Weight | | | | | | | | | | | | | kg | | | | | | | | | | | | | | | | | | | | |
| Type of Tyres |  | | | | | | | | | | | | | | | | | | Measured Tyre Pressures | | | | | | | | | | | | | FRONT | | | | | | | | LEFT | RIGHT | | | | REAR | | | | LEFT | RIGHT | | |
|  |  | | | |  |  | | |
| Motive Power | * Electric | | | | | | | | * Diesel | | | | | | * Petrol | | | | * LPG | | | | | | | * CNG | | | | | | | * Other: | | | | | | | | | | | | | | | | | | | |
| Battery Type | * Lead Acid | | | | | | | | * Gel | | | | | | * Li-Ion | | | | Other: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Truck Min/Max Battery Weight | MIN | | | | kg | | | | | | MAX | | | | | kg | | | Actual Battery Weight | | | | | | | | | | | kg | | | | | | | | | | | | | | | | | | | | | | |
| Additional Relevant Truck Details  Other approved attachments and capacities, Registration numbers, Tyre pressures, etc |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Modifications  If there is any evidence of modifications, detail them here |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **4.1.1 Truck 1 Owner Details** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Truck Owner |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Owner Address |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Suburb |  | | | | | | | | | | | | | | | | | | | | | | | | Postcode | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| Contact Name |  | | | | | | | | | | | | | | | | | | | | | | | | Phone | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| Email |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **4.1.2 Truck 1 Configuration at Time of Incident** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Attachment Fitted |  | | | | | | | | | | | | | | | | | Max. Capacity of Attachment | | | | | | | | | | | | | | kg | | | | | | | | | | | | | | | | | | | | |
| Mast Height or  Boom Extension | mm | | | | | | | | | | | | | | | | | Mast/Pantograph  (for reach trucks) | | | | | | | | | | | | | | * Reached | | | | | | | | | | | | * Retracted | | | | | | | | |
| Tilt/Boom Angle | Degrees | | | | | | | | | | | | | | | | | Variable Capacity  Height/Extension/Angle | | | | | | | | | | | | | | * Yes | | | | | | | | | | | | * No | | | | | | | | |
| Attachment Capacity at Height/Extension/Angle | kg | | | | | | | | | | | | | | | | | Weight of Load  (if applicable) | | | | | | | | | | | | | | kg | | | | | | | | | | | | | | | | | | | | |
| Has the Truck been subject to any of the following post incident? | * Started | | | | | | | | | | | * Driven | | | | | | | | * Mast Raised | | | | | | | | | * Mast Lowered | | | | | | | | | | | | | | * Mast Tilted | | | | | | | | | |
| * Cabin Opened | | | | | | | | | | | * Items Removed | | | | | | | | * Lifted by Crane | | | | | | | | | * Lifted by Forklift | | | | | | | | | | | | | | * Removed by Transporter | | | | | | | | | |
| Reason for Above | * Free Operator | | | | | | | | | | | * Free other Person | | | | | | | | * Stabilise after Incident | | | | | | | | | | | | | | | | | * Assist Recovery | | | | | | | | | | | * Clear Incident Site | | | | |
| * Other: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **4.1.3 Truck 1 Damage** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Known Pre-Existing Damage on Truck |  | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| CONTINUES OVER PAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **4.1.3 Truck 1 Damage Continued** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Description of Truck Damage  Detail observations only, not commentary or theories |  | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| **4.1.4 Truck 1 Damage Caused by Recovery (Section 4.1.2)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Description of Truck Damage Caused during Recovery |  | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| **4.1.5 Truck 1 Photos** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Photos  tick each box once photos taken | * ID/Name Plate | | | | | | | | | | | | * Capacity Plate(s) | | | | | | | | | | * Mod. Plate(s) | | | | | | | | | | | | | * LPG/CNG Plate | | | | | | | | | | * Battery ID Plate | | | | | | |
| * Attach. ID Plates | | | | | | | | | | | | * Operator Manual | | | | | | | | | | * Logbook | | | | | | | | | | | | | * Controls | | | | | | | | | | * Gauges/Hours | | | | | | |
| * Front | | | | | | | | | | | | * Front LH at 45° | | | | | | | | | | * LH side | | | | | | | | | | | | | * Rear LH at 45° | | | | | | | | | | * Rear | | | | | | |
|  | * Rear RH at 45° | | | | | | | | | | | | * RH side | | | | | | | | | | * Front RH at 45° | | | | | | | | | | | | | * Roof/Top   (if possible) | | | | | | | | | | * Undercarriage   (if possible) | | | | | | |
|  | * Mast/Boom | | | | | | | | | | | | * Carriage | | | | | | | | | | * Load Guard | | | | | | | | | | | | | * Attachment | | | | | | | | | | * Wheels/Tyres | | | | | | |
|  | * Seat/Seat belt | | | | | | | | | | | | * Tow Hitch | | | | | | | | | | * Modifications | | | | | | | | | | | | | * Damaged Items | | | | | | | | | | * Impact Marks | | | | | | |
| Other Photos |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | |
| 4.2: Forklift or Industrial Truck 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Type of Truck  (as per Section i) |  | | | | | | | | | | | | | | | | | | | | AS/ISO Standard complied to | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| Make |  | | | | | | | | | | | | | | | | | | | | Variant | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| Model |  | | | | | | | | | | | | | | | | | | | | Year Model | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| Serial Number |  | | | | | | | | | | | | | | | | | | | | Unit ID | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| Mast/boom Height |  | | | | | | | | | | | | | | | | | | | | No. of stages | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| Max Lift Capacity | kg | | | | | | | | | | | | | | | | | | | | Load Centre | | | | | | | | | | mm | | | | | | | | | | | | | | | | | | | | | |
| Drawbar Pull | Newtons | | | | | | | | | | | | | | | | | | | | Max Towed Weight | | | | | | | | | | kg | | | | | | | | | | | | | | | | | | | | | |
| Type of Tyres |  | | | | | | | | | | | | | | | | | | | | Measured Tyre Pressures | | | | | | | | | | FRONT | | | | | | | | | LEFT | RIGHT | | | | REAR | | | | LEFT | RIGHT | | |
|  |  | | | |  |  | | |
| Motive Power | * Electric | | | | | | * Diesel | | | | | | | * Petrol | | | | | | | * LPG | | | | | | * CNG | | | | | | | | | | | | * Other: | | | | | | | | | | | | | |
| Battery | * Lead Acid | | | | | | * Gel | | | | | | | * Li-Ion | | | | | | | Other: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Truck Min/Max Battery Weight | MIN | | | | | kg | | | | MAX | | | | kg | | | | | | | Actual Battery Weight | | | | | | | | | | kg | | | | | | | | | | | | | | | | | | | | | |
| Additional Relevant Truck Details  Other approved attachments and capacities, Registration numbers, Tyre pressures, etc |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Modifications  If there is any evidence of modifications, detail them here |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **4.2.1 Truck 2 Owner Details** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Truck Owner |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Owner Address |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Suburb |  | | | | | | | | | | | | | | | | | | | | | | | Postcode | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| Contact Name |  | | | | | | | | | | | | | | | | | | | | | | | Phone | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| Email |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **4.2.2 Truck 2 Configuration at Time of Incident** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Attachment Fitted |  | | | | | | | | | | | | | | | | | | | | Max. Capacity of Attachment | | | | | | | | | | kg | | | | | | | | | | | | | | | | | | | | | |
| Mast Height or  Boom Extension | mm | | | | | | | | | | | | | | | | | | | | Mast/Pantograph  (for reach trucks) | | | | | | | | | | * Reached | | | | | | | | | | | * Retracted | | | | | | | | | | |
| Tilt/Boom Angle | Degrees | | | | | | | | | | | | | | | | | | | | Variable Capacity  Height/Extension/Angle | | | | | | | | | | * Yes | | | | | | | | | | | * No | | | | | | | | | | |
| Attachment Capacity at Height/Extension/Angle | kg | | | | | | | | | | | | | | | | | | | | Weight of Load  (if applicable) | | | | | | | | | | kg | | | | | | | | | | | | | | | | | | | | | |
| Has the Truck been subject to any of the following post incident? | * Started | | | | | | | * Driven | | | | | | | | | * Mast Raised | | | | | | | | | | | * Mast Lowered | | | | | | | | | | | | | | * Mast Tilted | | | | | | | | | | |
| * Cabin Opened | | | | | | | * Items Removed | | | | | | | | | * Lifted by Crane | | | | | | | | | | | * Lifted by Forklift | | | | | | | | | | | | | | * Removed by Transporter | | | | | | | | | | |
| Reason for Above | * Free Operator | | | | | | | | | | * Free other Person | | | | | | | | | | | * Stabilise after Incident | | | | | | | | | | | | | | | | * Assist Recovery | | | | | | | | | * Clear Incident Site | | | | | |
| * Other: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **4.2.3 Truck 2 Damage** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Known Pre-Existing Damage on Truck |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| CONTINUES OVER PAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **4.2.3 Truck 2 Damage Continued** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Description of Truck Damage  Detail observations only, not commentary or theories |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| **4.2.4 Truck 2 Damage Caused by Recovery (Section 4.2.2)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Description of Truck Damage Caused during Recovery |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| **4.2.5 Truck 2 Photos** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Photos  tick each box once photos taken | * ID/Name Plate | | | | | | | | | | | | * Capacity Plate(s) | | | | | | | | | | * Mod. Plate(s) | | | | | | | | | | | | | * LPG/CNG Plate | | | | | | | | | | * Battery ID Plate | | | | | | |
| * Attach. ID Plates | | | | | | | | | | | | * Operator Manual | | | | | | | | | | * Logbook | | | | | | | | | | | | | * Controls | | | | | | | | | | * Gauges/Hours | | | | | | |
| * Front | | | | | | | | | | | | * Front LH at 45° | | | | | | | | | | * LH side | | | | | | | | | | | | | * Rear LH at 45° | | | | | | | | | | * Rear | | | | | | |
|  | * Rear RH at 45° | | | | | | | | | | | | * RH side | | | | | | | | | | * Front RH at 45° | | | | | | | | | | | | | * Roof/Top   (if possible) | | | | | | | | | | * Undercarriage   (if possible) | | | | | | |
|  | * Mast/Boom | | | | | | | | | | | | * Carriage | | | | | | | | | | * Load Guard | | | | | | | | | | | | | * Attachment | | | | | | | | | | * Wheels/Tyres | | | | | | |
|  | * Seat/Seat belt | | | | | | | | | | | | * Tow Hitch | | | | | | | | | | * Modifications | | | | | | | | | | | | | * Damaged Items | | | | | | | | | | * Impact Marks | | | | | | |
| Other Photos |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | |

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| SECTION 5: Details of Property Damage | | | | | | | | | | | | | | | | |
| Provide details of property damaged caused as a result of the incident. Where possible, list and property damage that may have been present prior to the incident, or damage that may have contributed to the incident occurring. Include description of other equipment that was damaged during the incident. Attach additional pages if required. | | | | | | | | | | | | | | | | |
| 5.1: Property Damage Observed | | | | | | | | | | | | | | | | |
| Site Name |  | | | | | | | | | | | | | | | |
| Address |  | | | | | | | | | | | | | | | |
| Suburb |  | | | | State | |  | | | Postcode | | | | |  | |
| Location on Site |  | | | | | | | | | | | | | | | |
| Additional Site Notes |  | | | | | | | | | | | | | | | |
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| Pre-Existing Property Damage in the Vicinity of the Incident |  |  | | | | | | | | | | | | | |  |
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| Observed Property Damage |  |  | | | | | | | | | | | | | |  |
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| Additional Pages Attached for Property Damage | | | | | | |  | YES | |  |  | | NO | | |
| Photos  tick each box once photos taken | * Ground Surface | | * Ground Gradient | * Other Equipment | | * Walkways | | | | | | | * Blind corners | | | |
| * Surrounding Buildings | | * Overhead Structures | * Underground Services | | * Obstructions | | | | | | | * Signage | | | |
| Other Photos |  | |  |  | |  | | | | | | |  | | | |
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| SECTION 6: Details of Transport to Site | | | | | | | | | | | | | |
| This section covers transport damage and unattended trucks that could be interfered with before entering site. Provide details of the transport company and driver. Attach additional pages if required. | | | | | | | | | | | | | |
| 6.1: Transport Company | | | | | | | | | | | | | |
| Company Name |  | | | | | | | | | | | | |
| Address |  | | | | | | | | | | | | |
| Suburb |  | | | State |  | | | Postcode | |  | | | |
| Driver Name |  | | | | | | | | | | | | |
| Time with Company  (months/years) |  | | | | | | | | | | | | |
| Date of Delivery |  | | | Time | AM / PM | | | | | | | | |
| Method of Transport  Tilt tray, low loader, transport trailer etc | | | | | | | | | | | | | |
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| Where was the truck left when delivered to site? | | | | | | | | | | | | | |
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| Was the truck signed for at the site, or left unattended outside the site? | | | | | | | | | | | | | |
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| Were the Ignition keys left in the truck when unattended? | | | | | | | | | | | | | |
| * YES | * NO | | Comment: | | | | | | | | | | |
| Copy of transport document collected and secured? | | | | | | | | | | | | | |
| * YES | * NO | | Comment: | | | | | | | | | | |
| Additional Comments from Transporter |  |  | | | | | | | | | | |  |
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| Additional Pages Attached for Transport | | | | |  | YES | |  | |  | NO | |

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| SECTION 7: Further Investigation | |
| This section covers items which require further inspection or examination after the initial inspection is completed. Attach additional pages if required. | |
| 7.1: Items Requiring Further Investigation or Examination | |
| Who completes the routine services/inspections? | Who completes hose repairs? |
| Who completes the annual service/inspections? | Has the hydraulic oil been replaced recently? |
| Who completes emergency repairs? | What specification hydraulic oil was used? |
| Who completes daily inspections? | Have there been any recent major repairs? |
| Who completes DC and AC electrical repairs? | Are there signs of electrical heat/melted wires, corrosion or fire? |
| Has the battery been replaced recently? | Are the correct specification batteries (including weight) installed? |
| Is the truck fitted with an oscillating axle? | Are there any powered outriggers installed? |
| Is the axle fitted with an axle lock or lateral stability control? | Were the powered outriggers deployed at the time of the incident? |
| Is the axle lock/stability control functioning correctly? | Are the powered outriggers interlocked to prevent retraction when the boom/mast is elevated? |
| Are the fork thicknesses within wear limits? | Does the boom/mast segments show any signs of stress or fatigue? |
| Are the tyres within wear limits? | Is there excess play in bearings / bushes / hubs / hinges? |
| Do the function controllers return to neutral? | Is the weight gauge/load indicator accurate (if fitted) |
| Is the horn functional? | Is the reverse beeper functional? |
| Are the work lights/blue lights functional? | Are the signal/park/brake/reverse lights functional? |
| **Other functions (where applicable)** | |
| Is the sequential seat belt interlock functional? | It the mast height speed reduction system functional? |
| Is the seat switch functional? | Is the dead man switch functional? |
| **Trucks with Elevating Platforms** | |
| Are the fall arrest anchor points identified? | Was a fall arrest harness used in the platform? |
| Were the fall arrest harness’s connected to the manufacturers designated anchor point? | Are the gate switches functioning? |
| Is the emergency lowering system accessible? | Is the emergency lowering system and functional? |
| **Other Items** | |
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| APPENDIX A: Investigation Process and Completion Flow Chart | |
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