

<<Insert Date>>

Ministry of Labour – Health and Safety Branch 51 Heakes Lane Kingston, Ontario K7M 9B1

Fax: 613-545-9831

Re: Report of Injury

Dear Sir or Madam,

Loyalist College is writing, pursuant to the obligations of Section 51 of the Occupational Health and Safety Act, to report a <<critical / fatal>> injury at the workplace. We wish to report the following information:

- 1. The person involved in the accident was:
 - <<Name>>
 - <<Address>>
- 2. <<Name of injured>> was an <<employee of Loyalist College / contractor, employed by <<name of contracting firm>> / student / visitor>>.
- 3. <<Nature and the circumstances of the accident and the bodily injury sustained>>
- 4. The following machinery or equipment was involved in the accident: << Description of equipment and/or machinery involved>>.
- 5. The accident occurred on <<date>> at <<time>> a.m/p.m.
- Witnesses to the accident were: <<Name(s)>>
 - <<Address(es)>>
- 7. The attending physicians were:
 - <<Name(s)>> <<Hospital>> <<Address>>

We trust this information is satisfactory to comply with the Occupational Health & Safety Act.

Yours sincerely,

<<Name>> <<Title>>

Form OHS-006(B) - Jul 26/11