

# Suzlon Accident Report

S.R.C. - Pipestone, MN U.S.A.

Team Member: Juan Gonzalez Taken to Hospital or Clinic? Y\_\_\_ N\_\_\_

Date of Occurrence: 1-25-08 Is This a Near Miss? Y\_\_\_ NX

Time of Occurrence: \_\_\_\_\_

Date Reported: 1-28-08 Team Leader: Justin Wabetsko

Department: Finishing Day shift \_\_\_ Night shift X

Location of where accident occurred (be specific)

working on The Blade

Description of accident / injury

resin sweated into his eye  
He was wearing a face shield

Witnesses names

\_\_\_\_\_

Corrective action (If needs further investigation use form F:ST:02)

Don't sweat so much / wear a head  
Band

Employee Feedback

Juan Gonzalez

Team Member Signature

Date

Justin Wabetsko

Team Leader Signature

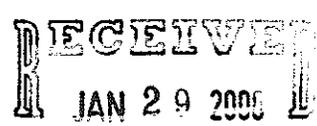
1-28-08

Date

Safety Officer Signature

Date

*Team Leader: Perform Accident Investigation, Implement Corrective Action, and submit completed form to the Safety and Environmental Officer before the end of your shift*



BY:.....