

SERIOUS ACCIDENT NOTIFICATION – FORM B (NON-RACE INCIDENTS)

This Accident Notification Form is issued by HRA to the various State Controlling Bodies for distribution to its Clubs and licensees.

In the unfortunate event of an accident which results in serious injury to a third party or damage to third party property the club or licensee should complete the form and forward the information to

Chief Executive
Harness Racing Australia Inc
Level 1, 400 Epsom Road
Flemington Vic 3031

The purpose of this notification is to allow collection of initial information in relation to any serious accident. Note (copy to the Chief Executive of your State Controlling Body).

Your Details

1. Name Club/Individual
2. Postal Address
Postcode
3. Contact Name Telephone No.
Facsimile No. Email address

Particulars of Accident/Incident

4. Date of event at am/pm
Date reported to you
5. Where did event occur?
6. Describe what happened
.....
.....
7. Is there any video record available eg. Camera/mobile Yes/No (Please Retain)
8. Who reported the event to you?
Name
Address
9. Name(s) and Permanent Address(es) of witness(es), if any
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.....
.....
10. What is your relationship with the Third Party?
.....
.....
.....
.....

Third Party Details

11. Name of Third Party
12. Permanent Address
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13. Nature and extent of injuries/damage
-
-
14. (a) Have you received any correspondence from Third Parties? Yes No
- (b) If so, please enclose them with this form
15. (a) Have you made any admission of liability? Yes No
- (b) Give details
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Please note:

1. Make sure that you give us ALL details about your claim.
2. Please send any documentation you have which may assist in our investigations.
3. Send us all original quotations and/or original invoices which you have received to repair or replace the damaged property.
4. If possible, keep damaged items available as your insurer may wish to inspect them.
5. Do not admit liability.
6. Contact your Claims Broker should you require assistance.

This form has been completed by:

Name

Position & Organisation

Contact Phone No

Signed..... Date