



VANDERHOOF DIVISION WOODLANDS FMS INCIDENT / ACTION TRACKING REPORTING FORM

ACTION TRACKING <input type="checkbox"/>	INCIDENT <input type="checkbox"/>
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INCIDENT DETAIL				
Contractor:	Activity:	Date:		
Location:	Licence #:	CP/BLK/RP #:		
Program	<input type="checkbox"/> Harvesting	<input type="checkbox"/> Roads	<input type="checkbox"/> Silviculture	<input type="checkbox"/> Facilities
Incident Type	<input type="checkbox"/> Non-Compliance	<input type="checkbox"/> Non-Conformance	<input type="checkbox"/> Natural	
Significance (per FMS Manual)	<input type="checkbox"/> High	<input type="checkbox"/> Medium	<input type="checkbox"/> Low	

FMS ISSUE(S) - Identify the Environmental Aspect impacted by the Incident	
<input type="checkbox"/> Uncontrolled Fire	<input type="checkbox"/> Riparian Areas
<input type="checkbox"/> Terrain Stability	<input type="checkbox"/> Petroleum/Chemical Handling
<input type="checkbox"/> Forest Land & Soil Productivity	<input type="checkbox"/> Uncontrolled Generation of CO ₂ , NO _x & SO _x
<input type="checkbox"/> Drainage Patterns & Hydrology	<input type="checkbox"/> Forest Health
<input type="checkbox"/> Fish Habitat	

Description of Incident (what happened, where, who was involved, size [ha, litres], what was affected, impacts to environment, describe damage, etc., attach map and photos)

Describe Root Cause(s) of Incident and any Contributing Factors (Not following procedure, natural causes, faulty equipment, weather event, wildfire etc.)

Action(s) Taken: (What actions were taken to prevent further damage and to report the situation)

Corrective Actions (For each significant contributing cause above, list the action(s) that will prevent further incidents of this type)		
Action(s)	Who	When

Investigation Team:	
Name(s)	Signature(s)

DISTRIBUTION / NOTIFICATIONS	
Woodlands Manager:	Date:
Divisional Manager:	Date:
Entered into ITS:	Date: