

## **RAY International Electrical Contracting & Maintenance LLC**

## **RAY International Electrical Contracting LLC**

**RAY International Power LLC** 

## **INCIDENT NOTIFICATION**

Abudhabi/ Dubai

DISTRIBUTIONT					<del></del>	ximum)					
	o:										
MD, CEO, GMs,	Disciplin	ne SR MGR, QHSE MGR	& advisor	s, LINE Manag	ers, HRA N	Manager					
REPORT ORIGI	NATED E	BY:									
NAME:	ME: Sijina		COMPANY / DIVISION:		SangProject2			GSM NO:			
LOCATION OF Kannur		DATE OF INCID		21-07-2023			TIME:		01:06 PM		
INCIDENT TYPE	1	Restricted World	k								
INCIDENT ACTUAL SEVERITY RATING:			2			Likelihood		Unlikely	Possible		Almost
POTENTIAL SEVERITY RATING:			4			Severity	Rare (1)	(2)	(3)	Likely (4)	Certain (5)
RISKLEVEL: Moderate						Catastrophic (5)	Low	Moderate	High	High	High
<b>Note:</b> Use the Risk Assessment Matrix to determine the <b>actual</b> and <b>potential</b> severity					severity	Major (4)	Low	Moderate	Moderate	High	High
rating for the incident. Seek assistance from the HSE Advisor if required.						Moderate (3)	Low	Moderate	Moderate	Moderate	High
Incidents with a potential 'Medium or High Risk' shall be referred to the RAY QHSE Dept immediately						Minor (2)	Low	Moderate	Moderate	Moderate	Moderate
						Negligible (1)	Low	Low	Low	Low	Low
Low		Moderate	HI	gh							
bhhjs											
bhg hhhj											
bhg hhhj ah				BRIEF	DESCRIPTION	ON OF DAMAGE					
bhg hhhj ah ahh jhg vgh hhh				BRIEF	DESCRIPTION	ON OF DAMAGE					
bhg hhhj ah ahh jhg vgh	SONS INJI	URED:		BRIEF 8	DESCRIPTION	ON OF DAMAGE					
bhg hhhj ah ahh jhg vgh hhh vg		URED: PLE AND DETAILS OF INJUR		8 16			NTS.				
bhg hhhj ah ahh jhg vgh hhh vg		PLE AND DETAILS OF INJUR	THE	8 16 FOLLOWING	FOR LOW	POTENTIAL INCIDEI		report comple	ted)		
bhg hhhj ah ahh jhg vgh hhh vg  UMBER OF PERS		(All incidents incl	THE	8 16 FOLLOWING	FOR LOW			eport comple	ted)		
bhg hhhj ah ahh jhg vgh hhh vg umber of pers names of inju immediate causes underlying		(All incidents incl	THE	8 16 FOLLOWING	FOR LOW	POTENTIAL INCIDEI		eport comple	ted)		
bhg hhhj ah ahh jhg vgh hhh vg umber of pers NAMES OF INJU		(All incidents incl	THE uding Me	8 16 FOLLOWING Idium or High F	FOR LOW	POTENTIAL INCIDEI		report comple	,	CLO	SED DATE: