DANGEROUS GOODS INVESTIGATION REPORT

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| **Time of Incident** | **Date of Incident** | **Report number** |
| **Place of Occurrence** | | **Type of Report**  **Violation observes**  **Incident**  **Accident**  **Other *(Please specify)*:** |
| **Name of Shipper** | | **Document attached**  **Air Waybill**  **Shipper’s declaration**  **Acceptance checklist**  **NOTOC**  **Photographs**  **Analysis report**  **Witness statement**  **Police Report**  **Other *(Please specify)*:** |
| **Address of Shipper** | |
| **Name of Consignee** | |
| **Address of Consignee** | |

1. **Details of Dangerous Goods Involved**

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| --- | --- | --- | --- | --- | --- |
| **UN / ID No.** | **Proper Shipping Name** | **Class/ Division and Compatibility Group** | **Sub risk** | **Number and type of package** | **Packing Instruction and packing group** |
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1. **Inspector’s Comment**

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| **Chronological report of occurrence** |
| **Violation to the regulation** |

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| **Action taken by Inspector** | |
| **Report Compiled by** | |
| **Signature** | **Date** |

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| **No.** | **Date** | **Person Involved** | **DG Involved (UN/ ID No)** | **Shipper Name** | **Consignee Name** | **Operator/ handling agent** | **Violation** | **Remarks** | **Closure Date by Inspector** |
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