

DIVING ACCIDENT REPORT – Underwater Liability

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Please print or type clearly. It is extremely important that you fill in this form COMPLETELY!

Date of Accident _____ Name of victim _____

Location of Accident _____ Vessel: _____

Address of Victim _____ Sex _____ Age _____

Was this an Instructional or Supervised Dive? _____

Check all items applicable: Fatality Bodily Injury Bends Embolism Non-Injury Other

Describe the diving Experience of the victim. Was he or she a Student? Novice Diver? Experienced Diver?

Describe the injuries suffered by the victim _____

Please provide all details regarding weather conditions (water, visibility, wind, waves etc.) _____

Please provide details of any equipment failure _____

Please describe any rescue or emergency procedures used and first aid given _____

Please list any other Emergency personnel / Agencies that attended _____

Narrative Report: Describe the accident and the events leading up to it with your best overview including the roles of the participants. Use additional pages if needed to give a complete account:

Your Name _____ Your Certification (Assoc. & #) _____

Your Address _____

Your Telephone/Fax Number: Days _____ Evenings _____

Do you have personal Instructor Insurance, or are you covered under a Facility Policy (please identify the facility)? _____

Please describe your current Diving Status (i.e. Active Instructor, Divemaster etc.) _____

Describe your personal participation in the incident (i.e. were you Instructing the victim, a witness, called on to assist etc.) _____

Please list the Names, Addresses and Phone Numbers of all other participants, witnesses. Use additional sheets if needed: _____

***BE SURE TO ATTACH COPIES OF APPLICATION FORMS & WAIVERS COMPLETED BY THE INJURED PARTY**

Email this report to firstdive@owlunderwriting.com
For emergency assistance call Peter Meyer @ (604) 250 1849