

# Incident Response Form



Document:	Form 149NW
Issue:	3
Related to:	NMC-NW-ISU Plan / TRISS Plan

Unit	NW	Route	A84	Link/ Section		Incident Reference	134427
Date	31/08/24	what3words	Stupidly-forgives-Petal	Chainage (ILO enters)			
Type of incident (refer guidance)		RTC					
XSP (refer guidance)		Direction of travel (refer guidance)		Born N1B & S1B			
Exact location details (refer guidance)		Annie Stright				Photos of incident	
						Yes	No
Disruption type (refer guidance)		- NONE		Diversion used (refer guidance)		- NO	
Weather conditions (refer guidance)		Dry		Road conditions (refer guidance)		Dry	
ISU / TRISS called out by		Control		Mol Reference No. (ILO enters)			
ISU or TRISS	ISU / TRISS vehicle reg.	A, Incident start time	B, Time arrived at site	C, Response time (B-A)	Response on time?	Time off site	
ISU	Redacted - Regulation 11(2)	17:08	1753	45 min	<input checked="" type="radio"/> Yes <input type="radio"/> No	18:00	
D, Reason for failure to meet response time if C is more than 1hr (45 mins for duals) (06.30 to 18.30) or 1.5 hrs (18.30 to 06.30) for ISU or 20 mins for TRISS							
E, Operations Manager or depute confirmation of reason for failure to meet response time at D				Signature		Date	
Response details		Nothing on arrival at scene				Photos of work	
						Yes	No
Further works required on site - OI(s) to be raised		advise on further work, eg permanent patch 2.0m x 1.0m required, new sign plate and 2 posts required etc					
Damage to Crown Property details		eg damage to verge / fencing / signs / carriageway / lighting units / bollards) - or enter "NO DCP"					
Car registration number / names details of persons involved							
SEPA notified		Dead animal details		including red, roe or fallow deer, otter, badger, red squirrel, raptor species			
No	Yes						
Emergency Services in attendance		<input checked="" type="radio"/> Police	Ambulance	Fire	Police Incident Number		
Initial resources attended incident							
Name	On site	Off site	Vehicle/ Plant	On site	Off site	Comments	
Redacted - Regulation 11(2)	1753	18:00	Redacted - Regulation 11(2)	1753	18:00		
	1753	18:00		1753	18:00		
Secondary or Contingency resources attended incident							
Time Called Out	Name	On site	Off site	Vehicle/ Plant	On site	Off site	Comments
I hereby certify that the details and resources stated above accurately represent the incident and the subsequent ISU/ TRISS response.							
Sign/ Print name/ Date (Incident Liaison on site)				Sign/ Print name/ Date (Manager/Supervisor)			
Signature		Redacted - Regulation 11(2)		Signature		Redacted - Regulation 11(2)	
Print Name/ Date		31/08/24 Redacted - Regulation 11(2)		Print Name/ Date		2/9/24	

