ANEXA 14

SITUATIA ACCIDENTELOR DE MUNCA IN PERIOADA…………………………….

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Nr. Crt.** | **Locul producerii accidentului****/Denumire lucrare** | **Nume Prenume accidentat** | **Data/Ora producerii accidentului** | **Cauza accidentului** | **Detalii despre accident** | **Consecinte** | **Functie** | **Zile calendaristice CM** | **Ore lucrate\*\*** | **Zona accidentata asupra salariatului** | **Situatii de risc ce ar fi putut genera accidente de munca** |
| Fara ITM | ITM | Mortal |
| **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** |  | **12** | **13** |
| 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |  |  |  |

\*ITM-incapacitate temporara de munca

\*\* se vor raporta orele lucrate de catre toti salariatii alocati sa-si desfasoara activitatea in locatiile/pentru SC MEGACONSTRUCT S.A., pe contractul in cauza (orele vor fi raportate in cazul in care are loc un accident de munca, de la data inceperii lucrarilor si pana la finalizarea acestora )

Intocmit,

Responsabil SSM

**Achizitor, Executant,**