

Initial Notification: Public Fatality /Accident

SENSITIVE MATERIAL

*Information contained in Initial Notifications may not be accurate and verified,
and is not to be released outside of the US Army Corps of Engineers.*

To: Safety & Occupational Health Office **Name of Person Making Report:**
Phone: (817) 886-1316
Fax: (817) 886-6453
E-mail to: DLL-CESWF-OD-ARG **Phone:**

Fatality: yes no

Day/Date of Accident:

Time:

Lake Office:

Exact Location:

Name of Victim:

Age/Sex:

Race:

PFD Worn: **Alcohol:** **Drugs:**

PFD Available: **Seatbelt Worn:**

Activity at Time of Incident

Swimming	Boating	Hiking
Wading	Fishing from Boat	Fishing from Shore
Motor Vehicle	Suicide	Camping
Other (describe)		

MUST provide ENG Form 3394 (Accident Report Form) to Safety Office within 5 Days
Revised June 2011

Description of Accident

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