

Notifiable incident petroleum installation and non-production installation

This form assists you to meet the requirements for:

- notifiable events in accordance with Section 56 of the Health and Safety at Work Act 2015 (HSWA) and/or
- notifiable incidents in accordance with regulations 70 and 71 of the Health and Safety at Work (Petroleum Exploration and Extraction) Regulations 2016 (the PEE Regulations).

Duties:

- Section 56 of HSWA requires that a PCBU must, as soon as possible after becoming aware that a notifiable event arising out of the conduct of the business or undertaking has occurred, ensure that WorkSafe New Zealand (WorkSafe) is notified of the event.
- Section 71 of the PEE Regulations requires that a permit operator or drilling contractor must notify WorkSafe of any notifiable incident declared under regulation 70 of the Regulations, as soon as practicable after the occurrence becomes known to the permit operator or drilling contractor.

Emails:

- Notification of notifiable event/incident: healthsafety.notification@worksafe.govt.nz
- Initial written report (within 7 days) and detailed written report (within 30 days): hhu.petroleum@worksafe.govt.nz

Post: WorkSafe New Zealand, PO Box 105-146, Auckland 1143

FOR HSWA NOTIFICATION, ONLY FILL IN SECTION 1 AND COMPLETE SCHEDULE 9 PART 1

FOR PEE NOTIFICATION, ONLY FILL IN SECTION 2 AND COMPLETE SCHEDULE 9 PART 1 AND PART 2

1. Notification of notifiable event (HSWA)

TYPE OF NOTIFICATION	NOTIFICATION PERIOD	INSTRUCTIONS
<input type="radio"/> Notification of notifiable event	As soon as possible after the occurrence of the notifiable incident becomes known to the permit operator or drilling contractor.	The permit operator or drilling contractor may use this form to notify HSWA notifiable events set out in sections 23 and 24 or use the online notification available on WorkSafe website Complete Schedule 9 Part 1 and please sign the declaration on the final page.

This event is notifiable under the Health and Safety at Work Act 2015. Please indicate which categories from Sections 23 and 24 the incident falls into:

2. Notification of notifiable incident (PEE Regulations)

In addition to the duty to notify under section 56 of HSWA, there is a separate duty to notify notifiable incidents under the PEE Regulations.

TYPE OF NOTIFICATION	NOTIFICATION PERIOD	INSTRUCTIONS
<input type="radio"/> Notification of notifiable event	PEE Regulations: As soon as practicable after the occurrence of the notifiable incident becomes known to the permit operator or drilling contractor.	Only use this form for notification of one of the incidents set out in regulation 70 of the Regulations. The notification must include the information required under Schedule 9 of the Regulations to the extent that it is reasonably available to the permit operator or drilling contractor at the time of notification. Use this form, for subsequent written reports required by the PEE Regulations. Please sign the declaration on the final page.
<input type="radio"/> Initial written report	The permit operator or the drilling contractor must provide WorkSafe with the initial written report by the latest of: <ul style="list-style-type: none"> - 7 days after the occurrence of the notifiable incident - 7 days after the permit operator or the drilling contractor becomes aware of the notifiable incident, and - any other date specified, in writing, by WorkSafe. 	Complete the information in Part 1 of Schedule 9 of the Regulations, as indicated in this form. Please sign the declaration on the final page.

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TYPE OF NOTIFICATION	NOTIFICATION PERIOD	INSTRUCTIONS
<input type="radio"/> Detailed written report	The operator must provide WorkSafe with the detailed written report by the latest of: <ul style="list-style-type: none"> - 30 days after the occurrence of the notifiable incident, and - 30 days after the permit operator or drilling contractor becomes aware of the notifiable incident - and any other date specified in writing, by WorkSafe. 	Complete the information in Parts 1 and 2 of Schedule 9 of the Regulations, as indicated in this form. Please sign the declaration on the final page.

Regulation 70 incident notified

Type of declared notifiable incident:

- a. an event that did not cause, but might reasonably be expected to have caused, a major accident
- b. a well kick that either:
 - i. exceeds 8 cubic metres (or 50 barrels); or
 - ii. requires the well to be shut-in
- c. an uncontrolled release of hydrocarbon vapour exceeding 1 kilogram
- d. an uncontrolled release of petroleum liquids exceeding 80 litres
- e. the failure of any part of a well whose failure would cause or contribute to, or whose purpose is to prevent or limit the effect of, the unintentional release of fluids from the well or a reservoir being drawn on by the well
- f. damage to, or failure of, a safety-critical element that requires intervention to ensure it will operate as designed
- g. a fire or an explosion at an installation
- h. the uncontrolled or unintentional release or escape of any substance (other than petroleum) on or from an installation, where that release or escape has the potential to cause serious risk to the health and safety of any person:
 - i. an unintended collapse of
 - i. an installation
 - ii. any part of an installation, or
 - iii. any plant on an installation, where that collapse jeopardises, or could have jeopardised, the integrity of the installation
- j. subsidence or local collapse of the seabed or ground that could have affected the foundations, or the integrity, of an installation
- k. an unplanned event (other than a false alarm) that requires the emergency response plan to be implemented
- l. damage to an installation caused by adverse weather conditions, earthquakes, or other natural events that have the potential to cause a serious risk to the health and safety of any person
- m. a collision between a vessel, an aircraft, or a vehicle and an installation that results in damage to the installation, the vessel, the aircraft, or the vehicle
- n. a failure of equipment required to maintain a floating offshore installation on station
- o. an incident involving loss of stability or buoyancy of a floating offshore installation

Schedule 9, Part 1

Information relating to notifiable incident

Permit operator or drilling contractor details

Full legal name:

(limited liability, company/partnership individual person, or other)

Trading name: (if different to legal name)

Permit operator/drilling contractor phone number:

Permit operator/drilling contractor email:

Physical address of permit operator/drilling contractor:

Postal address of permit operator/drilling contractor:

Same as above

Name of the installation or location where the notifiable incident occurred

Name of installation:

Physical address of installation:

Same as permit operator/drilling contractor physical address

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Information about the notifiable incident

Start date and time of notifiable incident:

Date: DD / MM / YEAR Time: AM PM

End date and time of notifiable incident:

Date: DD / MM / YEAR Time: AM PM

Has the scene been held/preserved? Yes No

Describe the notifiable incident: (including where the event happened and it happened)

Describe any action to make workplace safe, including details of any disturbance of the workplace:

Was an emergency response initiated? Yes No

Credible escalation scenario

(Note: For the selected regulation 70 clause, describe how this incident might have escalated if circumstances were slightly different, for example, if another 'key' control barrier failed. Take credit for safeguards that worked or remained available. You do not need to complete a credible escalation description against every clause under Regulation 70)

Describe the work or activity being undertaken at the time of the notifiable incident:

Failed equipment details (optional)

Please provide the information below as it assists WorkSafe to identify equipment failure trends, and support development of safety alerts where significant trends are observed.

Manufacturer:

Model:

Tag number:

Part number:

Injuries

If greater than five people, submit information separately.

Number of injured people:

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Injured person 1

Name of permit operator or drilling contractor: (if different from above)
Name of injured person:
Date of birth: DD / MM / YEAR
Sex:
Occupation:
Work phone:
Mobile phone:
Email:
Residential address:
Describe the injuries sustained:
Describe the work or activity being undertaken at the time the injuries occurred:
Day of shift and hour of shift: (for example, 5th day of 7, first hour of 12)

Injured person 2

Name of permit operator or drilling contractor: (if different from above)
Name of injured person:
Date of birth: DD / MM / YEAR
Sex:
Occupation:
Work phone:
Mobile phone:
Email:
Residential address:
Describe the injuries sustained:
Describe the work or activity being undertaken at the time the injuries occurred:
Day of shift and hour of shift: (for example, 5th day of 7, first hour of 12)

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Injured person 3

Name of permit operator or drilling contractor: (if different from above)
Name of injured person:
Date of birth: DD / MM / YEAR
Sex:
Occupation:
Work phone:
Mobile phone:
Email:
Residential address:
Describe the injuries sustained:
Describe the work or activity being undertaken at the time the injuries occurred:
Day of shift and hour of shift: (for example, 5th day of 7, first hour of 12)

Witnesses

Please provide details for witnesses to the notified incident (not restricted to incidents where injuries have occurred).
If greater than three witnesses submit information separately.

Number of witnesses:

Witness 1

Name:
Occupation:
Mobile phone:
Email:

Witness 2

Name:
Occupation:
Mobile phone:
Email:

Witness 3

Name:
Occupation:
Mobile phone:
Email:

Unintended release of fluid

Composition of fluid that escaped or burned, including known toxicity:
Estimated quantity: (tonnes)
Duration of escape: (hours)
Weather conditions:

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Serious damage

Equipment damaged, and to what extent:

Whether the equipment or the installation has been, or will be, shut down:

Action and cause

Immediate action taken or intended to be taken, if any, to prevent recurrence of the incident:

Immediate cause analysis:

Schedule 9, Part 2

Analysis and remedial action

- Attached detailed written report containing:
 - root cause analysis
 - actions to prevent recurrence of the same or a similar incident with the responsible party and completion date

Copies of all documentary material either referred to or relied on (or both) in preparing this notice, which may include, without limitation, as appropriate: (tick included)

- Witness statements
- Safety management system documents
- Drawings, diagrams, and photographs
- Third-party reports (audit, inspection, material analysis etc)
- Internal records and correspondence
- Other: (for example, investigation report)

Declaration

Declaration signed by an officer or a delegate of the permit operator or drilling contractor, on behalf of the permit operator or drilling contractor.

- I declare that to the best of my knowledge, the information provided in this notification is true and correct.

Name:

Email:

Position:

Date: DD / MM / YEAR

Signature:

Note: The above declaration is considered to be an electronic signature that is reliable as appropriate for the purpose of this notification

- I have attached information (for example, the detailed written report and other supporting documents)