



Lake County Property Damage – Supervisor Investigation

Lake County Board of County Commissioners

Supervisor must complete this report **immediately** following property damage.

Report must include **FULL** details concerning the property damage incident

Section I – Property Damage/Conditions/Facts

Name of Employee		Department		Division		Job Title	
McCall, Truman		Public Works		Road Operations / MA III		Equipment Operator III	
Date of Incident	Time of Incident	Name of Supervisor			Phone Number of Supervisor		
08/17/11	07:45	Dean, Lee			352-669-2814		
Name of Division Director (If Applicable)				Name of Department Director			
Conway, Lori				Stivender, Jim			
Specific Location of Incident				Type of damage			
SR 19, Umatilla				Spilled hydraulic oil.			
Names of all Witnesses		Lee, Steve					
<p>Specifically, describe the items / property damaged in the incident. Describe in full detail, with serial numbers, property tag numbers, associated costs, etc., if applicable. Describe how the damage occurred and the extent of damage. Describe the task being done; conditions at the worksite (example: sunny, slippery, indoors, etc.). Details are crucial for processing and prevention.</p>							
<p>Supervisor Investigation: I got a call from Truman saying that the Gradall (#14300) had spilled hydraulic oil on CR 450/Collins St at the daycare and on SR 19 from 450 to the traffic light.</p>							

Section II – Preventative Action

<p>What preventative action will eliminate/minimize the risk of this type of incident again? What would employee do to prevent incident? Examples: Written procedure, training, equipment change, corrective actions-warning/suspension to employee, , etc.</p>
<p>Supervisor Preventative Action: This incident could not have been prevented. It was caused by equipment failure.</p>

Forward completed report to the Department of Employee Services,
315 W. Main St, Admin. Building, Rm. 430 / Tavares, FL 32778.

(Please attach Employee and Witness Statements, repair estimates, police reports and pictures and submit reports/forms as one packet, if possible, to Employee Services.)



Lake County Property Damage – *Employee Statement*

Lake County Board of County Commissioners

Employee must complete this report **immediately** following the property damage.

Report must include **FULL** details concerning the injury/illness incident.

Section I – Employee Information

Name of Employee		Phone Number		E-mail
McCall, Truman		352-669-2814		MaintArea3@lakecountyfl.gov
Department		Division		Job Title
Public Works		Road Operations / MA III		Equipment Operator III
Date	Time	Injury or Illness Report Required		Name of Supervisor
08/18/11	07:30	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Randy Dean
Specific Location of Incident			Type of Damage	
CR 450 (Collins St) & SR 19			Hydraulic oil leak.	
Names of all Witnesses		None		

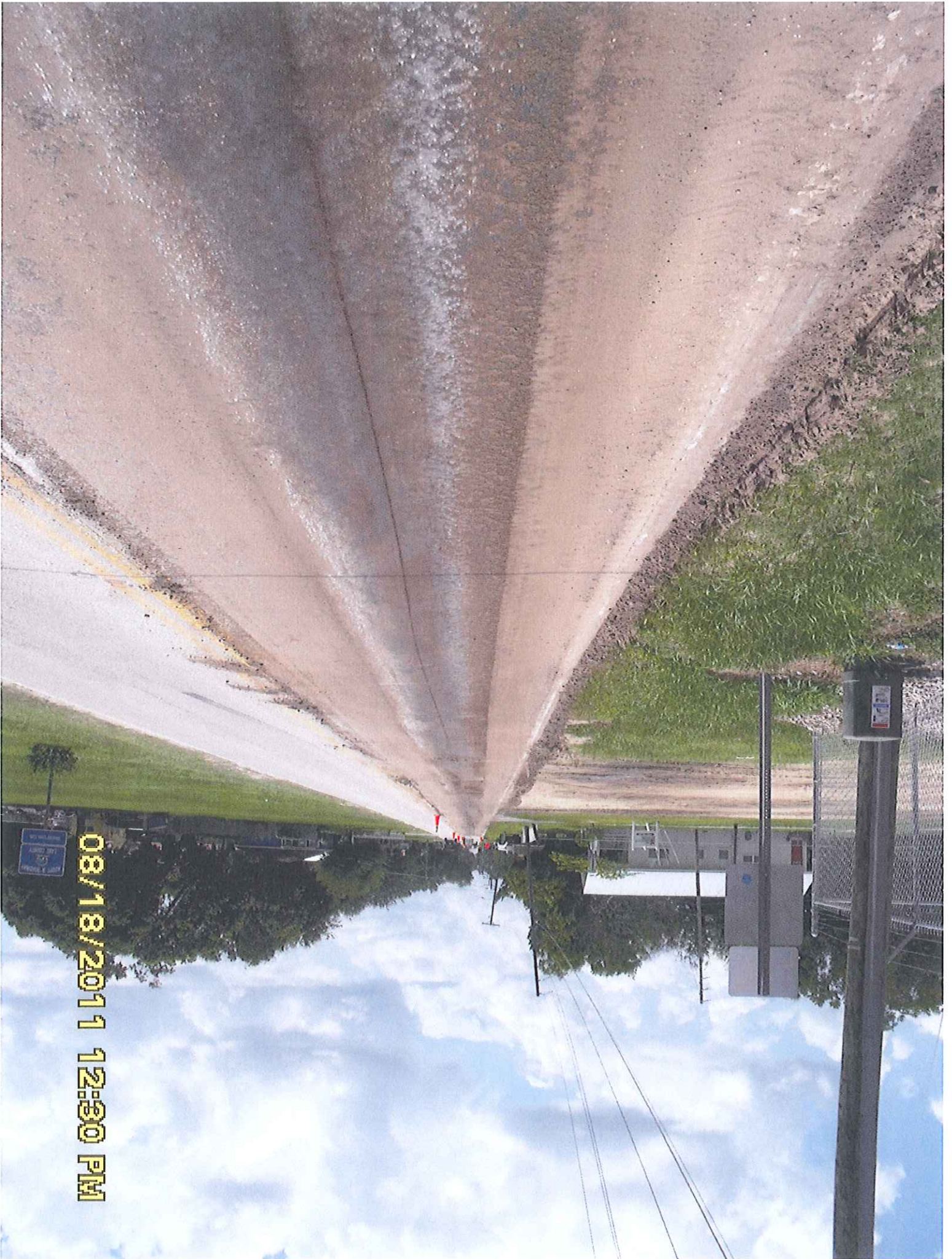
Section II – Conditions/Facts

Specifically, describe the items / property damaged in the incident. Describe in full detail, with serial numbers, property tag numbers, associated costs, etc., if applicable. Describe how the damage occurred and the extent of damage. Describe the task being done; conditions at the worksite (example: sunny, slippery, indoors, etc.). **Details are crucial for processing and prevention.**

Employee Statement: I was driving Gradall # 14300 down CR 450 and turned South onto SR 19 in Umatilla. I looked in my side mirror behind me, and I saw something on the road that looked like water. I drove a little further and looked again, it was still there, so I pulled off the road. That's when I realized I had a hydraulic leak. It had rained yesterday, so I thought that it was water in the boom that was coming out. I have observed this before. Weather conditions this morning was hot and sunny.

Forward completed report to the Department of Employee Services

315 W. Main St., Admin. Building, Rm. 430 / Tavares, FL 32778.



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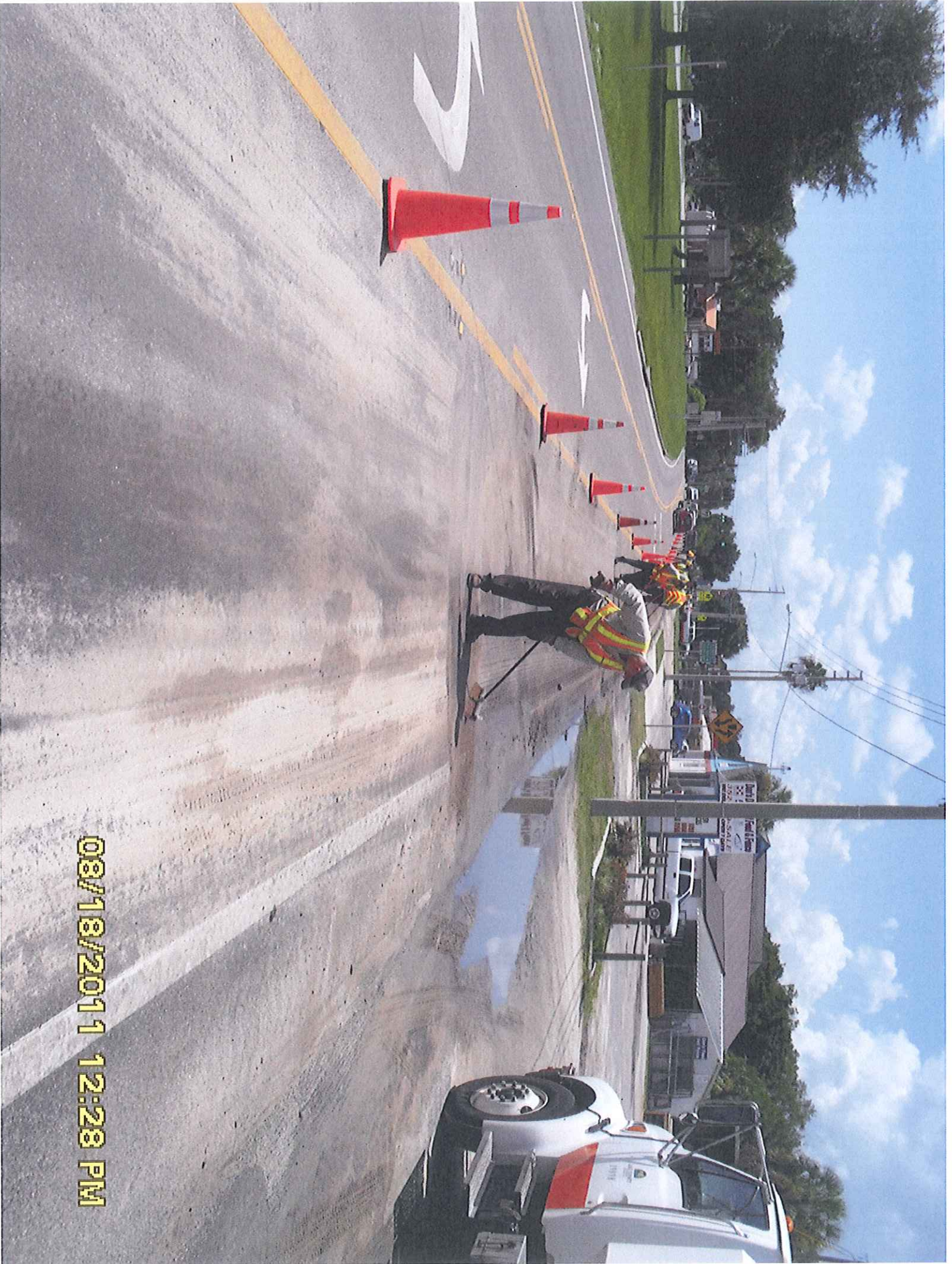
LET'S
GO



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