

Whakapā mai

## Notify WorkSafe

**Notify WorkSafe of a death**

If there has been a death, call WorkSafe immediately on 0800 030 040 (24/7).

Do you know which notification form you need? [? Help](#)

Not sure  Yes

What would you like to notify us about?

- I would like to report a work-related injury, illness or incident
- I would like to report an unsafe or unhealthy work situation
- I would like to report completed or scheduled work as required under the Health and Safety at Work Regulations

Do you know which notification form you need? [? Help](#)

Not sure  Yes

What notification are you submitting?

Please select...



✓ Please select...

Report a death

Report an incident

Report an injury or illness

Non-workplace event (Gas or Electricity)

Raise a health & safety concern

Raise a mentally healthy work concern

Make a protected disclosure

Make a complaint about an authorisation holder

Installation fault notice

Make a complaint about a product appliance

Report particular hazardous work

Report asbestos removal

Report commissioning of hazardous substances location or transit depot

Report intended detonation and deflagration of class 1 substances

Report mining, tunnelling, quarrying and alluvial operations (quarterly report)

Report a refusal to issue a compliance certificate

Report an Amusement Device Incident

Notification of Major Hazard Facility form (pdf)

Notifiable Incident Major Hazard Facility form (pdf)

Mining And Tunnelling Operations Notification And Reporting Form (pdf)

Quarry and alluvial mine operations notification and reporting (pdf)

Report a high risk activity (pdf)

Asbestos exposure registration pdf form

Details of Works Notice (pdf)

Notice of well operations (pdf)

Notification of temporary storage for a pest control operation or pesticide application (pdf)

Notification of accident or incident involving amusement device (pdf)

Notice of repair or alteration to an amusement device (pdf)

Adventure Activity Operators Notification (pdf)

Adventure Activity Audit form (pdf)

**What would you like to notify us about?**

- I would like to report a work-related injury, illness or incident
- I would like to report an unsafe or unhealthy work situation
- I would like to report completed or scheduled work as required under the Health and Safety at Work Regulations

**Are you authorised to report this event?** [? Help](#)

- No
- Yes

**Was the event work related, or in a place of work?** [? Help](#)

- No
- Yes

**Did the event involve any of the following?** [? Help](#)

- Asbestos
- Amusement device
- Gas or Electricity
- Geothermal
- Major Hazard Facility
- Mining and tunnelling operations
- Petroleum
- Pressure equipment, cranes and passenger ropeways
- Quarry & alluvial mines
- None of these

**How many people were hurt or became sick?** [? Help](#)

- None
- 1
- 2
- 3
- 4 or more

**Did the event involve any of the following?** [?](#) [Help](#)

- Asbestos
- Amusement device
- Gas or Electricity
- Geothermal
- Major Hazard Facility
- Mining and tunnelling operations
- Petroleum
- Pressure equipment, cranes and passenger ropeways
- Quarry & alluvial mines
- None of these

**Did this event put someone's health & safety at risk?**

- No
- Yes

**How many people were hurt or became sick?** [?](#) [Help](#)

- 1
- 2
- 3
- 4 or more

**What would you like to notify us about?**

- I would like to report a work-related injury, illness or incident
- I would like to report an unsafe or unhealthy work situation
- I would like to report completed or scheduled work as required under the Health and Safety at Work Regulations

**Select the notification you would like to submit to WorkSafe**

**Raise a health & safety concern**

You have a concern about an unsafe or unhealthy work situation that could lead to a death or serious injury or illness, then you can contact us and raise your concerns.

[Get started](#)

**Installation fault notice**

You want to notify us about a electrical or gas installation fault.

[Get started](#)

**Raise a mentally healthy work concern**

The business or organisation you work for is not meeting their obligations to look after your mental health at work, you can use this form to raise a concern with WorkSafe.

[Get started](#)

**Product appliance complaint**

You want to notify us if you have a complaint about an electrical or gas product.

[Get started](#)

**Protected disclosure**

You want to make a protected disclosure about serious wrongdoing by an organisation you work (or have worked) for. The Protected Disclosures (Protection of Whistleblowers) Act 2022 provides various protections to people who "blow the whistle".

[Get started](#)

**Notification of Major Hazard Facility form (pdf)**

You want to notify us of a potential major hazard facility.

[Get started](#)

**Make a complaint about an authorisation holder**

You have a complaint or concern about a particular authorisation holder, you can raise it with WorkSafe. We are responsible for approving authorisations (via a licence or registration) in the following areas:

- Asbestos removal licence holders (class A and B)
- Adventure Activity Operators
- Occupational Diving Certificate of Competence holders
- Amusement device registrations
- Compliance certifier/compliance certificate
- Controlled Substance Licence Holders.

[Get started](#)

**Report a high risk activity (pdf)**

You want to notify us about High risk activities required to be notified under Regulation 229 are specified in Schedule 7 of the Regulations. The high risk activities notification requirement allows us to assess whether the operator will be able to effectively manage the activity prior to the activity commencing.

[Get started](#)

**Asbestos exposure registration form (pdf)**

You want to notify us about asbestos exposure. If you've been exposed to asbestos, you can register with the Asbestos Exposure Database.

[Get started](#)

# Incident

Notification Ref: 00003600

You must complete all sections before you can submit the notification.

1

## Reporter & Contact Information

Reporter details

Start

Contact person

Start

2

## Notification Details

Person Conducting a Business or Undertaking (PCBU)

Start

Event

Start

Victim

Start

3

## Declaration

Declaration

Start

4

## Review & Submit

Please review the sections above, then click submit to send this to WorkSafe.

Submit