

Incident Report - (Incident UID - IMF/TTK/COI/III/25/00191)

Incident Information

Incident UID	IMF/TTK/COI/III/25/00191	Category Name	Injury
Incident Descript ion		Status	FinalReportReleased
Site Name	Coimbatore	Department Nam e	Maintenance
Incident Date & Ti me	06-Oct-2025 06:00:00 AM	Created On	06-Oct-2025 10:04:38 AM
Reported By	Kumar Samarjeet		

Sections

Level of Injury	© L1-Bruise
	C L2-Abrasion
	C L3-Burn
	C L4-Laceration
	C L5-Fracture
	C L6-Amputation

Photograph of injury & machine

: 0

Injury treatment details

Number of people injured:: 0	Treatment of Injury: Referred to Hospital f	Details of treatment given & doctor's ad
	or Treatment	vice:: NA

Injured person details

Name of the injured person: N A	Gender: 0	Role – ON / OFF: 0	If Off role, mention the contractor name: : NA
	No. of Year's total experience in TTK Prestige : NA	No. of years in this process / machine : NA	Injury Happened in Which Shift? : NA

Immediate Corrective Actions taken

Actions: NA Responsibility: NA S	Status: NA	Completion date: NA
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FIR Team

Sequence Name Level of Approver
