PRIJAVA NEZGODE IN POŠKODBE PRI DELU

A – SPLOŠNI DEL

I. PODATKI O PRIJAVITELJU

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| 1. | IME IN PRIIMEK:  |
| 1a. | IME PODJETJA PRIJAVITELJA: |
| 2. | DELOVNO MESTO: |
| 3. | TELEFON: | 4. | NASLOV E-POŠTE PRIJAVITELJA: |

II. PODATKI O DELODAJALCU

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| 5.  | EMŠO DELODAJALCA |

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| 6. | NAZIV DELODAJALCA: |
| 7. | SEDEŽ/NASLOV DELODAJALCA (ulica, hišna številka, poštna številka, kraj): |
| 8. | ŠIFRA DEJAVNOSTI DELODAJALCA: |

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| 9. | ŠTEVILO ZAPOSLENIH DELAVCEV PRI DELODAJALCU (vpiše se šifra iz šifranta): |

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III. PODATKI O NEZGODI

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| 10. | EVIDENČNA ŠTEVILKA PRIJAVE PRI DELODAJALCU: |
| 11. | SKUPNO ŠTEVILO POŠKODOVANIH V NEZGODI: |

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| 12. | DATUM NEZGODE (dan, mesec, leto): |

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| 13. | URA NEZGODE (vpišite uro od 00 do 23 brez minut, 99 - čas neznan): |

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| 14. | KJE SE JE NEZGODA PRIPETILA: Če je izbrana šifra 9–drugo, vpišite: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| 15. | KRAJ NEZGODE (ulica, hišna številka, poštna številka, kraj ali cestni odsek, država): |
| 16. | DELOVNO OKOLJE: |

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| 17. | DELOVNI PROCES:  |

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| 18. | VZROK NEZGODE:  |

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| 19. | PROMETNA NEZGODA (1 – da, 2 – ne): |

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| 20. | KRATEK OPIS NEZGODE: |
| 21. | OSEBE, PRISOTNE NA KRAJU NEZGODE (šifrant 24): Če je izbrana šifra 9 – drugo, vpišite osebe:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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IV. PODATKI O POŠKODOVANCU

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| 22. | EMŠO:  |

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|  23 | IME IN PRIIMEK POŠKODOVANCA: |
| 24. | NASLOV PREBIVALIŠČA:  |
| 25. | OBČINA PREBIVALIŠČA:  |

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| 26. | SPOL (1 – moški, 2 – ženski, 9 – ni podatka):  |

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| 27. | DRŽAVLJANSTVO (0 – neznano, 1 – slovensko, 2 – neslovensko iz EU, 3 – neslovensko zunaj EU):Če je izbrana šifra 2 ali 3, vpiši državljanstvo: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| 28. | ZAPOSLITVENI STATUS: |

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| 29. | VRSTA ZAPOSLITVE: |

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| 30. | DELOVNI ČAS: |

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| 31. | POKLIC, KI GA OPRAVLJA: |

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| 32. | SPECIFIČNA AKTIVNOST V ČASU NEZGODE: |

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| 33. | KOLIKO UR JE DELAL TA DAN PRED NEZGODO: |

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| 34. | VRSTA POŠKODBE (1 – lažja, 2 – težja, 3 – smrtna): |

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| 35. | MATERIALNI POVZROČITELJ: |

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| 36. | OBLIKA POŠKODBE: |

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| 37. | NAČIN POŠKODBE: |

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| 38. | POŠKODOVANI DEL TELESA: |

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| PODPIS DELODAJALCA: |

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| DATUM IZPOLNITVE: |