【通勤災害用】労災事故発生連絡票　別紙

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| **氏名** | | **事業所名** | | |
| **出勤時の事故** | 自宅を離れた時刻　午前・午後　　時　　　分頃 | | 就業開始予定時刻　午前・午後　　時　　　分頃 | |
| **退勤時の事故** | 就業終了時刻　　　午前・午後　　時　　　分頃 | | 事業所を出た時刻　午前・午後　　時　　　分頃 | |
| **事故現場** | 事故発生の場所　　　　　　　　　　　　　　　　　　　　　　　　　付近 | | | |
| **事故現場見取り図**   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | | | | 北の方角  道路の進行方向  車線数・道路幅  地名・交差点名・道路名  信号・標識  目印になる建物  その他事故に関係する情報  などを記入ください  ■自車  □相手車 |
| **通勤経路** | 通常の通勤所要時間　　　　　　　時間　　　　　分 | | | |
| **経路図　（**自宅　⇔　事故発生場所　⇔　就業場所　）  ・Googleマップ等で別紙に示していただいても結構です。  ・事故発生場所に×印をつけてください。寄り道した場合、場所と要件を記入してください。 | | | | |
| **別途ご提供いただく資料**  □免許証コピー  □事故証明書（原本1通　警察署で交付を受けてください）  ※相手方のいる事故の場合、後日「第三者行為災害届」に記入・押印をしていただきます。  　相手方と事故の**示談をする前に**必ず事業所へ報告してください。 | | | | |