



Mine Emergency Response Checklist

Incident Notification & Activation

Steps to initiate the emergency response and notify relevant personnel.

Time of Incident Notification

Notification Method (e.g., Radio, Phone, Alarms)

- ☐ Radio
- ☐ Phone
- ☐ Alarm System
- ☐ Other

Number of People Initially Notified

Enter a number...

Brief Description of Incident Triggering Notification

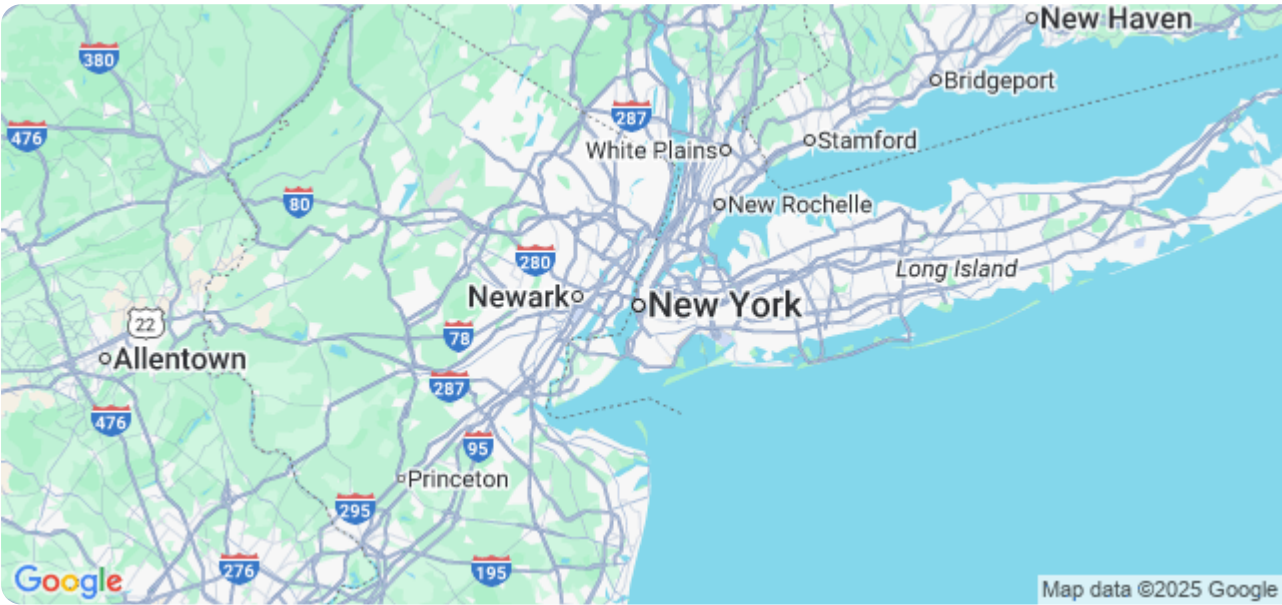
Write something...

Emergency Level (e.g., Minor, Moderate, Severe)

- ☐ Minor
- ☐ Moderate
- ☐ Severe

Approximate Incident Location

 [Set My Current Location](#)



Date of Incident Notification

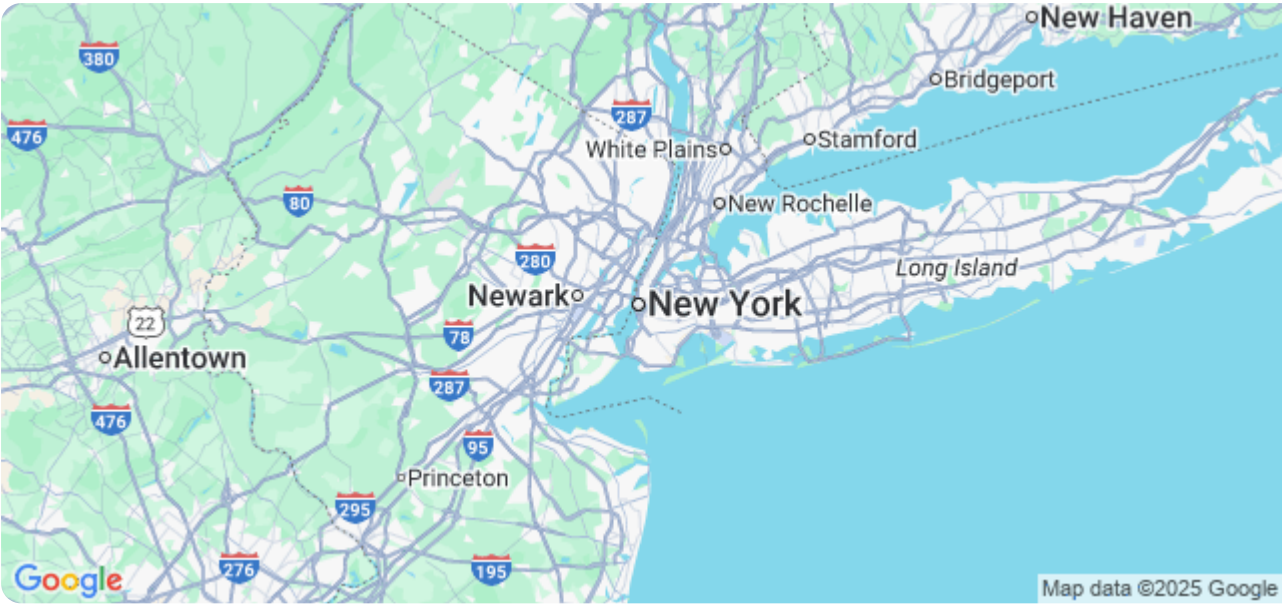
Enter date...

Emergency Assembly Points & Headcount

Procedures for directing personnel to safe assembly areas and confirming their presence.

Primary Assembly Point Location

 Set My Current Location



Expected Personnel at Primary Assembly Point

Enter a number...

Actual Personnel Present at Primary Assembly Point

Enter a number...

Roll Call Status

- ☐ Complete
- ☐ Partial
- ☐ Incomplete

Notes on Roll Call / Missing Personnel

Write something...

Roll Call Completion Date

Enter date...

Roll Call Completion Time

Secondary Assembly Point Required?

☐ Yes

☐ No

Communication & Coordination

Verification of communication systems and coordination with emergency services.

Communication Method Used (Initial)

☐ Radio

☐ Phone

☐ Alarm System

☐ PA System

Radio Channel Used

Enter a number...

Emergency Services Notified?

- ☐ Yes
- ☐ No

Emergency Services Contact Information

Write something...

Time of Initial Contact with Emergency Services

Personnel Notified (Select All That Apply)

- ☐ Mine Manager
- ☐ Safety Officer
- ☐ First Aid Team
- ☐ Contractors

Message Clarity Assessment (1-5, 5 being Clear)

Write something...

First Aid & Medical Response

Assessment of first aid resources and medical response protocols.

Number of Trained First Aiders Present

Enter a number...

First Aid Kits Location Verified?

- ☐ Yes
- ☐ No
- ☐ N/A

Oxygen Supply Available & Verified?

- ☐ Yes
- ☐ No
- ☐ N/A

Last First Aid Kit Expiry Date Checked?

Enter date...

Estimated Time for Medical Assistance to Arrive

Notes on Any Existing Medical Conditions of Personnel (if known)

Write something...

Attach First Aid Training Records (if applicable)

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Rescue Operations Readiness

Checklist for rescue equipment and team preparedness.

Number of Trained Rescue Personnel

Enter a number...

Rescue Team Activation Status

- ☐ Ready
- ☐ Standby
- ☐ Unavailable

Last Rescue Team Training Date

Enter date...

Estimated Rescue Response Time

Rescue Equipment Inspection Report

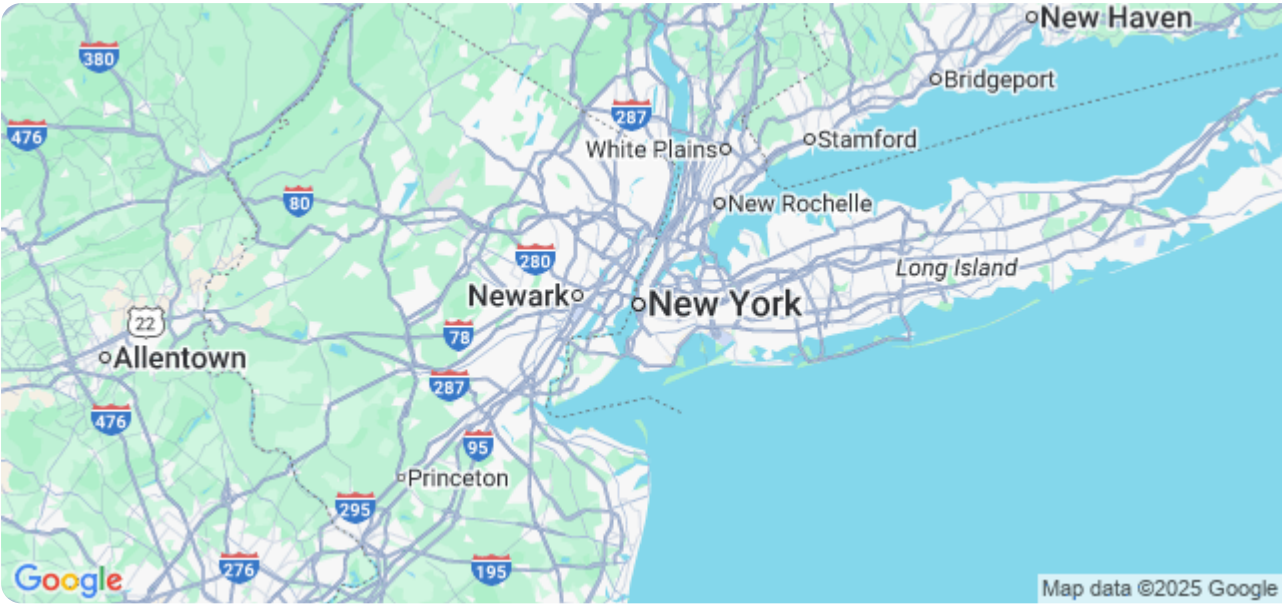
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Available Rescue Equipment

- ☐ Self-Contained Breathing Apparatus (SCBA)
- ☐ Rope Rescue Gear
- ☐ Search and Rescue Dogs
- ☐ Emergency Medical Supplies
- ☐ Specialized Rescue Vehicles

Location of Primary Rescue Equipment Cache





Mine Ventilation & Air Quality

Confirmation of ventilation systems and air quality monitoring.

Ventilation Fan RPM

Airflow (m³/s or CFM)

Oxygen Level (%)

Carbon Monoxide (CO) Level (ppm)

Enter a number...

Methane (CH₄) Level (ppm)

Enter a number...

Ventilation System Status

- ☐ Normal
- ☐ Reduced
- ☐ Alarm
- ☐ Offline

Time of Ventilation Monitoring

Fire Suppression Systems

Inspection and verification of fire suppression equipment functionality.

Water Tank Level (%),

Enter a number...

Fire Hose Pressure (PSI) – Check & Record:

- ☐ Nominal
- ☐ Low
- ☐ High

Last Fire Suppression System Inspection Date:

Enter date...

Time of Fire Suppression System Inspection:

Fire Extinguishers - Status (Select all that apply):

- ☐ Charged
- ☐ Partially Discharged
- ☐ Discharged
- ☐ Needs Inspection
- ☐ Not Available

Sprinkler System Functional Test Result:

- ☐ Passed
- ☐ Failed
- ☐ Not Tested

Hazardous Materials Handling

Procedures for handling and containing hazardous materials released during an emergency.

Type of Hazardous Material Involved (if applicable)

- ☐ Explosives
- ☐ Flammable Liquids
- ☐ Toxic Gases
- ☐ Corrosives
- ☐ Radioactive Materials
- ☐ Other - Specify in Long Text

Detailed Description of Released Material (if 'Other' selected)

Write something...

Estimated Volume/Quantity Released (in appropriate units)

Enter a number...

Containment Measures Implemented (e.g., booms, absorbent materials)

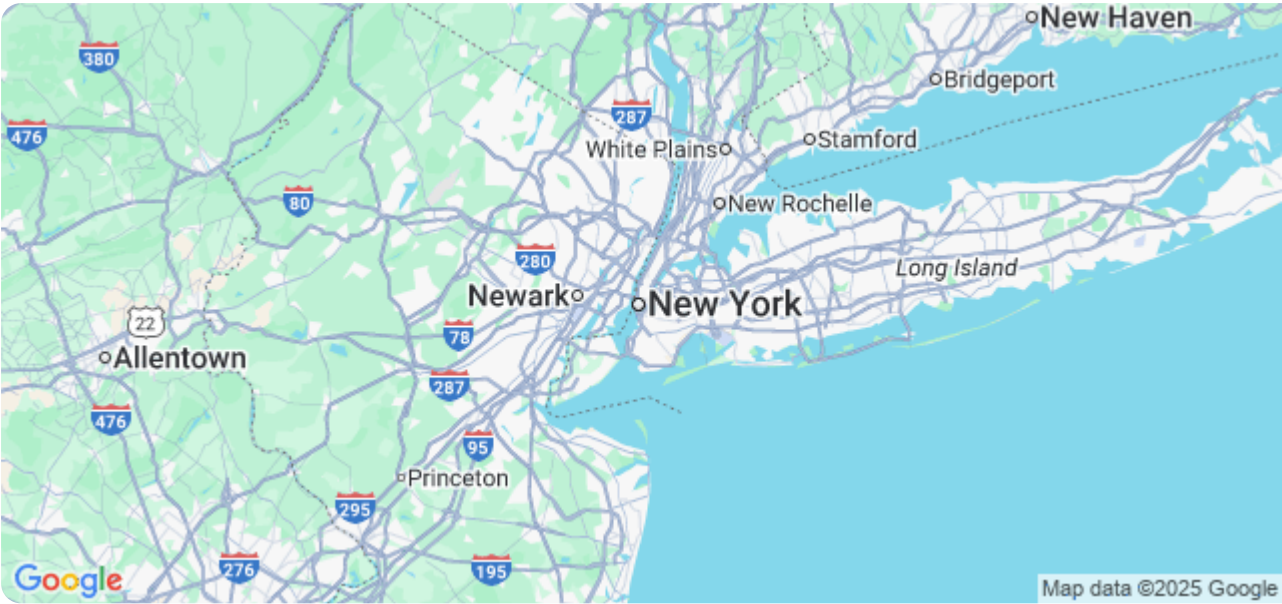
Write something...

Personal Protective Equipment (PPE) Used

- ☐ Respirator
- ☐ Gloves
- ☐ Eye Protection
- ☐ Protective Clothing
- ☐ Boots

Spill/Release Location (GPS Coordinates)

 Set My Current Location



Date of Spill/Release

Enter date...

Time of Spill/Release

Post-Incident Debriefing & Reporting

Steps for conducting a debriefing and submitting necessary reports after the emergency.

Incident Date

Enter date...

Incident Time

Detailed Incident Narrative

Write something...

Severity Level

- ☐ Minor
- ☐ Moderate
- ☐ Major
- ☐ Critical


Estimated Cost of Damage

Enter a number...

Lessons Learned & Recommendations

Write something...

Supporting Documentation (Photos, Reports)

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Reporting Status

- ☐ Draft
- ☐ Submitted
- ☐ Approved

Equipment & Resource Availability

Confirmation of necessary equipment (e.g., lighting, PPE) and resources are readily available.

Number of Fully Charged Emergency Lighting Units

Number of Supplied Air Respirators (SARs) Available

Availability of First Aid Kits (Specify Locations)

- ☐ Surface First Aid Station
- ☐ Underground First Aid Station 1
- ☐ Underground First Aid Station 2

Condition of Communication Radios (All Units)

- ☐ Functional
- ☐ Requires Maintenance
- ☐ Non-Functional

Amount of Available Oxygen Cylinders (Full)

Condition of Escapeways (Clear of Obstructions)

- ☐ Clear
- ☐ Minor Obstruction
- ☐ Significant Obstruction