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| 1. **INFORMACIÓN DEL INCIDENTE.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | **1. PERSONAS** | | | | | | **2. VEHICULAR** | | | | |  |  | | **3. AMBIENTAL** | | | | | | | | |  | **4. DAÑO A PROPIEDAD** | | | | | | | | | | | | | | | | |  | | | **5. OTROS** | | | | | | | | | | | | |  | |
|  |  | Sin lesión /  Primer Auxilio | | | |  | | Incidente Vehicular | | | | |  | | |  | | Incidente Ambiental | | | | | | | |  | | | | Propia | | | | | | | |  | | | | |  | | | | |  | | | | | | Incidente Seguridad de Procesos | | | | | |
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|  |  | Con Lesión / TRIF | | | |  | | Accidente vehicular | | | | |  | | |  | | Accidente Ambiental | | | | | | | |  | | | | Terceros | | | | | | | |  | | | | |  | | | | |  | | | | | | Incidente Operacional | | | | | |
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|  |  | Fatalidad | | | | |  |  |  | | |  |  | **3.1. RECURSO AFECTADO** | | | | | | | | | | |  | | | | | | |  | | |  | | | |  | | | | |  | | |  | | | | | | |  | | |  | | |
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|  |  | Lesión a terceros | | | | |  |  |  | | |  |  |  | | | Agua | |  | | | | | Fauna | | | | |  | | |  | | | | | | | |  | | | | | |  | | |  | | | | | |  | | | | |
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|  |  | HIPO |  | |  |  |  |  |  | | |  |  |  | | | Suelo | |  | | | | | Aire | | |  | |  | | |  | | | | | | | |  | | | | | |  | | |  | | | | | |  | | | | |
|  | **Otro:** | |  | |  |  |  |  |  | | |  |  |  | | | |  | | | |  | |  |  | | | | | |  | | |  | | |  | | | | | | |  | | | | | | |  | |  | | | |  | | |
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|  | **Valoración RAM del Incidente:** | | | | | | |  | | | | |  | **Valoración RAM Potencial** | | | | | | | |  | | | | | | | | |  | | |  | | | **Registrable (SI / NO)** | | | | | | | | | | | | | | | | |  | | | |  | |
| Ampliar en caso de NO ser registrable | | | | | | | | | | | | | | | | | | | | |
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|  | **Sin incapacidad** | | | | | | |  |  | | | **Con incapacidad** | | | | | | | | | |  | |  |  | | | | | |  | | |  | | |  | | | | | | |  | | | | | | |  | | |  | | |  | | |
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| **Datos Básicos.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Lugar** | | | | **Empresa** | | | | | |  | **Área de ocurrencia** | | | | | | | | | **Fecha Incidente** | | | | | | | | **Día de la semana** | | | | | | | | | | | | | **Hora** | | | | | | | | | | | **Jornada** | | | | | | | |
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| **Fecha inicio investigación:** | | | |  | | | | | | **Fecha final Investigación:** | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | **Otros Datos** | | | | | | | | | | | |  | | | | | | | |
| **Describa como sucedió el hecho según investigación.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **II. LESIÓN A PERSONAS[[1]](#footnote-1).** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Nombre y Apellidos** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | **Cargo** | | | | | | | | | | | | | | | | **Identificación** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Edad** | | | | | | | | | | **Actividad que se encontraba desarrollando** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Antigüedad (Compañía)** | | | | | | | | | | | | | | **Antigüedad (Labor)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | **No. días en el sitio** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Turno** | | | | | | | | | | | | | | | | | | | | | | | | | | | **Parte del cuerpo lesionada** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Utilizaba elementos de protección personal** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | |  | | | | | | | | | | | | | | | | SI | | | | | | NO | | | | | | | | | **ARL** | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | **Días de Incapacidad** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Utilizaba elementos de protección personal de forma adecuada** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | SI | | | | | | NO | | | | | | | | | **EPS** | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Otros Datos u Observaciones** | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **III. VEHICULAR.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Datos del Conductor** | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Verificación Runt / Simit** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | En caso de Presentar Novedad – Relacionar tipo de infracción | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Tipo de Vehículo** | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | **Placa** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | **Lugar Exacto** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Descripción:** | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Área:** | | | | | | | | | | | | | | | | | | | | | | | | | | | **Externa a ODL** | | | | | | | | | | |  | | | | | | **Interna de ODL** | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | **Área y/o comunidad afectada**: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Otros Datos u Observaciones** | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **IV. AMBIENTAL.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Tipo de afectación:** | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | **Derrame** | | | | | | | | |  | | | | | | | **Otro / Cual:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Recurso Afectado:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Aire | | | | | | | | | | | |  | | | | | | | | Agua | | | | | | |  | | | | | Suelo | | | | | | |  | | | | Fauna | | | | | |  | | | |
| **Nombre del producto o sustancia que afectó:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Cantidad emitida / derramada** | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Cantidad recuperada** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Área afectada:** | | | | | | | | | | | | | | | | | | | | | | | | | | | **Externa a ODL** | | | | | | | | | | |  | | | | | | **Interna de ODL** | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | **Área y/o comunidad afectada**: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Otros Datos u Observaciones** | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **V. DAÑO A LA PROPIEDAD.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Bienes afectados propiedad de:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **ODL** | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | **Tercero** | | | | | | | | | | | | | | | | | | | |  | | | | | **Nombre equipo/instalación** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Descripción:** | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Otros Datos u Observaciones** | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **VI. OTROS.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Incidente de Seguridad de Procesos:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Incidente Operacional** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Proceso afectado** | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | **Perdida de Contención** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | **Liberación Espontanea** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Volumen emitido/derramado** | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | (Litros/Galones) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Volumen Recuperado** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | (Litros/Galones) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Descripción:** | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Otros Datos u Observaciones** | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **VII. VALORACIÓN DE COSTOS Y PERDIDAS.** | | | | | | | | | | | |
| **Concepto** | | | | | | | **Costo ($)** | | | | |
| Daño a la propiedad (incluye equipos de proceso y herramientas). | | | | | | |  | | | | |
| Afectación al proceso (baja en producción) | | | | | | |  | | | | |
| Lucro cesante (parada de unidades o plantas). | | | | | | |  | | | | |
| Contaminación de productos. | | | | | | |  | | | | |
| Contaminación ambiental (aire / agua / suelo / fauna) | | | | | | |  | | | | |
| Reparaciones y mantenimiento (Aplicación Espuma). | | | | | | |  | | | | |
| Investigación (Horas personal dedicado). | | | | | | |  | | | | |
| Transporte muestra | | | | | | |  | | | | |
| Estimado Atención medica | | | | | | |  | | | | |
| Otros Asociados | | | | | | |  | | | | |
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| **Total Costos Estimados** | | | | | | | **$** | | | | |
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| **VIII. OBJETIVO DE LA INVESTIGACIÓN.** | | | | | | | | | | | |
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| **IX. RELACIÓN DE EVIDENCIAS.** | | | | | | | | | | | |
| **Posición / Área:**  (Lugar de Ocurrencia / Ubicación de Trabajador /Herramientas / Materiales) |  | | | | | | | | | | |
| **Personas**:  (Versión Involucrado / Testigos) |  | | | | | | | | | | |
| **Partes**:  (Información de Herramientas, Equipos, Máquinas, Diseño del Puesto y demás materiales que se utilizaban en el momento del suceso) |  | | | | | | | | | | |
| **Papel (Documentos)**:  (Procedimientos / Normas de Seguridad / Registros / Evidencias Relacionadas con Permisos y Turnos de Trabajo) |  | | | | | | | | | | |
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| **X. RELACIÓN DE HALLAZGOS** | | | | | | | | | | | |
| **Posición / Área:** |  | | | | | | | | | | |
| **Personas**: |  | | | | | | | | | | |
| **Partes**: |  | | | | | | | | | | |
| **Papel (Documentos)**: |  | | | | | | | | | | |
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| **XI. DETERMINACIÓN DE LAS CAUSAS.** | | | | | | | | | | | |
| **Metodología Sugerida ANÁLISIS CAUSA RAÍZ. (De acuerdo al sistema usado por cada Contratista esto es de mera liberalidad)**  **POR FAVOR DEBEN INCLUIR DESCRIPCIÓN COMPLETA** | | | | | | | | | | | |
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| **XII. PLAN DE ACCIÓN.** | | | | | | | | | | | |
| **Descripción Acción Inmediata / Plan de Choque** | | | **Evidencia** | | **Responsable** | | | | | | **Fecha** |
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| **Descripción Plan de Acción a Ejecutar** | | | **Evidencia** | | **Responsable** | | | | | | **Fecha programada** |
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| **XIII. INTEGRANTES EQUIPO INVESTIGADOR.** | | | | | | | | | | | |
| **Líder de la investigación:** | | | | **Teléfono:** | |  | | **Firma** |  | | |
| **Nombres y Apellidos** | | **Cargo / Rol**  (Jefe Inmediato / Supervisor) | | **Empresa/Dependencia** | | | | | | **Firma** | |
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| |  |  |  |  | | --- | --- | --- | --- | | **XIV. RECIBO / APROBACIÓN INFORME DE INVESTIGACIÓN.** | | | | | **Nombre responsable del proceso/área/activo** |  | **Vo.Bo. Prof. SSTA-PRE / Responsable SSTA** | | | **Firma** |  | **Nombre** |  | | **Fecha** |  | **Firma** |  |  |  |  |  |  | | --- | --- | --- | --- | | **XV. CIERRE DE INVESTIGACIÓN.** | | | | | **Nombre responsable del proceso/área/activo** |  | **Vo.Bo. Prof. SSTA-PRE / Responsable SSTA** | | | **Firma** |  | **Nombre** |  | | **Fecha** |  | **Firma** |  | | | | | | | | | | | | |

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| **XVI. ANEXOS.** |
| **SE DEBE ANEXAR LOS DOCUMENTOS SOPORTE EN EL ORDEN ESTABLECIDO:**  **(FORMATOS ODL Y/O FORMATOS CONTRATISTA)**   1. SSTA-PRE-F-113. Notificación Inmediata de Incidentes ODL 2. SSTA-PRE-F-155. Plantilla Alertas de Seguridad ODL. (Para Bicentenario Formato 156) 3. SSTA-PRE-F-001. Investigación Incidentes 4. GR-F-001. Valoraciones Matriz RAM Real y RAM Potencial 5. SSTA-PRE-F-087. Versión Incidentes (Incidentado y Testigos) 6. SSTA-PRE-F-088. Divulgación Aprendizaje (Análisis Técnico del Incidente y Aprendizaje) 7. Plan de Acción del Incidente (el avalado en la investigación). Incluyendo, Registro de Asistencia y Soportes Asociados de acuerdo con el cumplimiento del plan de acción. 8. Otros Documentos Asociados. Que aportan a la investigación y cierre del caso. Como son: Línea de hechos y condiciones, Permiso de trabajo, bitácora, ATS, Procedimiento, Registro Fotográfico, otras entrevistas y demás.   **Nota**: Para la firma Contratista que vaya a utilizar los formatos propios de su sistema, a excepción de los formatos SSTA ODL: 113, 155/156 y 088 que si deben presentarse; toda la información soporte se adjuntará en el orden establecido. Tener en cuenta que de acuerdo con: Valoración RAM del incidente, si es un caso registrable y si la investigación es liderada por ODL, se deberán utilizar todos los formatos ODL según lo establecido en el Procedimiento para Reporte, Investigación, Análisis y Seguimiento de Incidentes ODL. |

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*En cumplimiento de las disposiciones de la Ley 1581 de 2012, el Decreto 1377 de 2013 y la demás normativa de protección de datos personales en Colombia, el titular autoriza de manera previa, expresa e informada a Oleoducto de los Llanos Orientales S.A., identificada con NIT No. 900203441 – 1, teléfono 6461300, dirección Carrera 11 A No. 93-35 Torre UNO 93 Piso 3 en la ciudad de Bogotá, D.C., y correo electrónico lineaser@odl.com.co, y a Oleoducto Bicentenario de Colombia S.A., identificada con NIT No. 900377365 - 6, teléfono 6461300, dirección Carrera 11 A No. 93-35 Torre UNO 93 Piso 3 en la ciudad de Bogotá, D.C., y correo electrónico participacionciudadana@bicentenario.com.co, (las “Compañías”) en calidad de responsables del tratamiento de sus datos personales, para que, por sí mismas o en asocio con terceros, almacenen, registren, transmitan, transfieran, usen, circulen y supriman sus datos personales en sus bases de datos bajo estrictas medidas de seguridad para la siguiente finalidad Investigación de incidentes. La vigencia de estos tratamientos será igual al periodo en que se mantenga la finalidad o finalidades (del respectivo tratamiento) de los mismos, o el periodo de vigencia que señale una causa legal, contractual o jurisprudencial de manera específica.*

*Así mismo, declara que fue informado sobre sus derechos a acceder (de manera gratuita), conocer, actualizar y/o rectificar sus datos personales, solicitar prueba de la autorización, ser informado del uso que se le ha dado a sus datos, presentar quejas ante la autoridad, revocar la autorización y/o solicitar la supresión de sus datos, y los demás derechos que la ley confiera, en la forma establecida en las Políticas de Tratamiento de Datos Personales de las Compañías, la cuales se encuentran disponibles en los enlaces: https://www.odl.com.co/. y https://www.bicentenario.com.co.*

*El titular declara que conoce estas políticas y entiende que incluye información adicional sobre los mecanismos para ejercer sus derechos y el alcance y operaciones del tratamiento aplicables a los datos personales que se proporcionan.*

1. En caso que se presente dos o más lesionados la información contenida en *“II. Lesión a personas”,* debe registrarse para cada uno. [↑](#footnote-ref-1)