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| **Centre for Lightning Protection-Arthur C Clarke Institute for Modern Technologies**  **Lightning Related Accidents and Damages** | | | | | |
| **1. Date and approximate time of Accident/Incident:** | | Date: | | Approximate time: | |
| **2. Location of Accident/Incident:** | |  | | | |
| **3. Brief description of Accident /Incident:** | |  | | | |
| **4. Damages and Losses:** | | Number of Deaths: |  | | |
| Number of Personal Injuries: |  | | |
| Description of Injury: |  | | |
| Deaths or Injuries of animals: |  | | |
| Damage to Electrical & Electronic Equipment: |  | | |
| Damage to property: |  | | |
| **5. There was an electricity power failure:** | | Yes | If yes, the duration of power outage: | |  |
| No |
| **6. Name :** | |  | | | |
| **7. Address:** | |  | | | |
| **8. Telephone/Mobile:** | |  | | | |
| **9. Grama Sewa Division of Accident/Incident:** | |  | | | |
| **10. District:** | |  | | | |
| **11. Has there been any awareness program on personal and equipment protection from lightning?** | | | | | |
| Yes/No |  | If Yes, by which institute |  | | |
| **12. Any other comments:** | |  | | | |

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