



99006059261002, 99006059261002

# Use of work equipment Indication of damage

Heruntergeladen am 01.07.2025 https://fimportal.de/xzufi-services/109423343/L100041

Modul	Sachverhalt
Leistungsschlüssel	99006059261002, 99006059261002
Leistungsbezeichnung I	Use of work equipment Indication of damage
Leistungsbezeichnung II	
Typisierung	3 - Bundesaufsichtsverwaltung: Regelung
Quellredaktion	Brandenburg
Freigabestatus Katalog	unbestimmter Freigabestatus
Freigabestatus Bibliothek	fachlich freigegeben (silber)
Begriffe im Kontext	
Leistungstyp	Leistungsobjekt mit Verrichtung
Leistungsgruppierung	Arbeitsschutz (006)
Verrichtungskennung	Entgegennahme (261)
SDG-Informationsbereich	Gesundheits- und Sicherheitsvorschriften im Zusammenhang mit verschiedenen Arten von Tätigkeiten, einschließlich der Risikovermeidung, Information und Ausbildung
Lagon Portalyorhund	





Modul	Sachverhalt
Einheitlicher Ansprechpartner	Nein
Fachlich freigegeben am	29.03.2023
Fachlich freigegen durch	Ministry of Labour, Social Affairs, Transformation and Digitalisation Rhineland-Palatinate (MASTD) Ministry of Social Affairs, Labour, Health and Demography Rhineland-Palatinate 29.03.2023 23.11.2020
Handlungsgrundlage	https://www.gesetze-im-internet.de/betrsichv_2015/1 9.html
Teaser	You must report any damage incidents involving certain work equipment or systems requiring monitoring in which components or safety-related equipment have failed.  If damage has occurred in your company due to the failure of components or safety equipment, you must report this to the competent authority.
Volltext	As an employer, you must report any damage in which components or safety-related equipment have failed to the occupational health and safety authority.  The occupational health and safety authority may require a safety assessment by an approved inspection body.  The competent authority must be notified immediately in cases of damage in which components or safety equipment have failed.





## Modul

#### **Sachverhalt**

# Erforderliche Unterlagen

Informal notification with the following information:

- Address of the company
- Address of the permanent establishment or the construction/assembly site at the scene of the incident
- Date of the event
- Type of event (e.g. explosion, media leak, crash)
- Number of people injured, number of people killed
- Work equipment involved
- Approved inspection body involved (in the case of installations requiring monitoring in accordance with Annex 2 of the Industrial Safety Ordinance)
- Involved body to determine the cause (in the case of work equipment in accordance with Annex 3 of the Industrial Safety Ordinance)
- Brief description of the event and the damage that occurred (including photos and videos)
- Measures already taken by the employer

The occupational health and safety authority may also request the following information from you:

- Risk assessment
- Proof that the risk assessment has been prepared by a competent person
- Information on responsible persons
- Information on protective measures taken
- Operating instructions

The notification must contain the following information:

- descriptions of the course of the accident,
- for the failure of the components/safety-related equipment

### Voraussetzungen

- You are an employer
- The following tools are involved: Elevator systems Pressure systems Installations in potentially explosive atmospheres Cranes Liquefied petroleum gas systems Mechanical tools for event technology
- it must be a case of damage in which components or safety equipment have failed

## Kosten

There are no fees or expenses.





Modul	Sachverhalt
Verfahrensablauf	<ul> <li>Submit the notification of the event to the competent authority without delay, together with all the necessary information.</li> <li>The competent authority will inform you whether further documents (e.g. an assessment by an approved review body) are required.</li> <li>The advertisement can be done online.</li> </ul>
Bearbeitungsdauer	
Frist	You must report the damage immediately.
weiterführende Informationen	
Hinweise	
Rechtsbehelf	No redress
Kurztext	<ul> <li>Notification of the use of work equipment in accordance with the Industrial Safety Ordinance Acceptance in the event of damage</li> <li>Damage in which components or safety-related equipment has failed must be reported to the occupational health and safety authority</li> <li>Prerequisite: The following work equipment is involved Elevator systems Pressure systems Installations in potentially explosive atmospheres Cranes Liquefied petroleum gas systems Mechanical tools for event technology</li> <li>Notification must be made immediately</li> <li>Responsible: Occupational health and safety authority or trade supervisory authority</li> <li>Use of work equipment Notification of damage</li> <li>Display requires information descriptions of the course of the accident, for the failure of the components/safety-related equipment</li> </ul>
Ansprechpunkt	
Zuständige Stelle	State Office for Occupational Safety, Consumer Protection and Health (LAVG)  Occupational Health and Safety Department





Modul	Sachverhalt
Formulare	Forms available: No
	Written form required: Yes
	Informal application possible: Yes
	Personal appearance required: No
	Online services available: No
Ursprungsportal	Verwendung von Arbeitsmitteln Anzeige Schadensfall, Use of work equipment Indication of damage