

Accident PreventionDate submitted: **Jan-10-26 05:43:11**

Lodge: **Lake City #893 (N)**
Report Year: **2025**
Report Period: **Period 3**
Lodge Chair: **Evison (Scott) Carroll**
Report Submitted by: **Evison (Scott) Carroll / elks893@scottcarrolldj.com**

Is there information to report for this period? **Yes**

Accident Summary

Number of Accidents/Incidents this Quarter: **none**
Description of Each (Type, Location, Resolution): **None**
Were Incidents Reported to Gallagher Bassett?: **No**

Inspection Summary

Monthly Safety Inspections Completed (Yes/No per Month): **Yes per month.**

Summary of Issues Found and Actions Taken: **All Issues completed as per lighting of Exit signs in the bar area corrected.
Kitchen grill area cleaned and grease drip pan replaced.
As noted Actions corrected.**

Date of Most Recent Lodge Safety Checklist: **1-5-26**

Preventative Measures

Trainings Conducted (Dates, Type, Attendance): **AED training**
Corrective Actions Implemented: **AED is in Place**

General Compliance

Alcohol Service Policy Reviewed/Updated (Yes/No): **Yes**
Kitchen/Equipment Safety Measures Enforced (Yes/No): **Yes**
Trainings Conducted (Dates, Type, Attendance): **Note Kitchen is leased out.**

Receipts / Images (if applicable)

Comments / Requests

Support or Resources Needed:

Corrective Actions

Implemented:

Yes