

# Report of an accident, dangerous occurrence or environmental incident

Document No: N-03000-FM0831 A159980

Date: 26/11/2021

For instructions and general guidance in the use of this form, please see the last page.

Part 1 is required within 3 days of a notified incident.

Part 2 is required within 30 days of notified incident.

## What was the date and time of the initial verbal incident notification to NOPSEMA?

<b>Date</b>	17 <sup>th</sup> May 2023	<b>Time</b>	12:10 hrs WST
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*NOTE: It is a requirement to request permission to interfere with the site of an accident or dangerous occurrence. Refer OPGGS(S)R, Reg. 2.49.*

## What is the date and time of this written incident report?

<b>Date</b>	14 <sup>th</sup> July 2023	<b>Time</b>	08:15 hrs WST
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## What type of incident is being reported?

*Please tick appropriate incident type*

<b>Accident or dangerous occurrence</b>	<input checked="" type="checkbox"/>	Complete parts 1A, 1B & part 2
<b>Environmental Incident</b>	<input type="checkbox"/>	Complete parts 1A, 1C
<b>BOTH (Accident or dangerous occurrence AND environmental incident)</b>	<input type="checkbox"/>	Complete ALL parts (1A, 1B, 1C, 2)

*Please tick all applicable (one or more categories)*

*To use electronically: MS Word 2007-10 – click in check box*

<b>Categories</b> <i>Please select one or more</i>	<b>Accidents</b>	Death or Serious injury <input type="checkbox"/> Lost time injury ≥3 days <input type="checkbox"/>	
	<b>Dangerous occurrences</b>	Hydrocarbon release >1 kg or ≥80 L (gas or liquid) <input type="checkbox"/> Fire or explosion <input type="checkbox"/> Collision marine vessel and facility <input type="checkbox"/> <b>Could have caused death, serious injury or LTI</b> <input checked="" type="checkbox"/> Damage to safety-critical equipment <input type="checkbox"/> Unplanned event - implement ERP <input type="checkbox"/> Pipeline incident <input type="checkbox"/> Well kick >50 barrels <input type="checkbox"/> Other: <input type="checkbox"/>	
	<b>Environmental incidents</b>	Hydrocarbon release <input type="checkbox"/> Chemical release <input type="checkbox"/> Drilling fluid/mud release <input type="checkbox"/> Fauna Incident <input type="checkbox"/> Other: <input type="checkbox"/>	

**Part 1A – Information required within 3 days of an accident, dangerous occurrence or environmental incident**
**General information – all incidents**

1.	Where did the incident occur?	Facility / field / title name	CPF Ichthys Explorer, Ichthys Field		
		Site name and location <i>Latitude/longitude</i>	CPF Ichthys Explorer Lat 13° 56.339 S, long 123° 17.9 E		
2.	Who is the registered operator/titleholder or other person that controls the works site or activity?	Name	INPEX Operations Australia Pty Ltd as delegated operator and agent for the titleholders		
		Business address	100 St Georges Terrace, Perth WA 6000		
		Business phone no.	08 6213 6000		
3.	When did the incident occur?	Time and time zone	10:07 hrs WST		
		Date	17 <sup>th</sup> May 2023		
4.	Did anyone witness the incident?	Yes or no <i>If yes, provide details below</i>	Yes		
	Witness details	Witness no 1	Witness no 2	Witness no 3	
	Full name	[REDACTED]			
	Phone no. (Business hours)	[REDACTED]			
	Phone no. (Home) (Mobile)	N/A			
	Email (Business) (Private)	[REDACTED]@inpx.com.au			
	Postal address	100 St Georges Terrace, Perth WA 6000			
	<i>NB: If more witnesses, copy and insert this section (4) here, and add extra witness numbers appropriately</i>				
5.	Details of person submitting this information	Name	[REDACTED]		
		Position	[REDACTED]		
		Email	[REDACTED]@inpx.com.au		
		Telephone no.	[REDACTED]		
6.	Brief description of incident	Whilst unbolting the Sea Water Coarse Filter A (SWCF) gearbox there was a release of pressurised sea water. The sea water forced the shaft, gearbox & motor off the top of the SWCF. The gearbox landed on the adjacent deck shearing off the motor which fell approx. 3m to the landing below. The gearbox & motor combined weight is approximately 150kg.			
7.	Work or activity being undertaken at time of incident	The scope of work underway was to remove the Sea Water Coarse Filter A backwash gearbox.			
8.	What are the internal investigation arrangements?	Internal INPEX Incident Investigation has commenced in accordance with the INPEX Event Reporting & Investigation Procedure.			

**Part 1A – Information required within 3 days of an accident, dangerous occurrence or environmental incident**
**General information – all incidents**

9.	Was there any loss of containment of any fluid (liquid or gas)?	Yes or no <i>If Yes, provide details below</i>	Yes			
Type of fluid (liquid or gas) <i>If hydrocarbon release please complete item no.15 as well</i>		Please specify _____ Hydrocarbon <input type="checkbox"/> Non-hydrocarbon <input checked="" type="checkbox"/> Please specify _____				
Estimated quantity <i>Liquid (L), Gas (kg)</i>		TBC				
Estimation details		Calculation <input type="checkbox"/>	Measurement <input type="checkbox"/>	Please specify _____		
Composition <i>Percentage and description</i>		Sea Water				
Known toxicity to people and/or environment		Toxicity to people		No		
		Toxicity to environment		No		
How was the leak/spill detected?		F&G detection <input type="checkbox"/> CCTV <input type="checkbox"/>	Visual <input checked="" type="checkbox"/> Other <input type="checkbox"/>			
Did ignition occur?		No <input checked="" type="checkbox"/> Yes <input type="checkbox"/>	Immediate <input type="checkbox"/> Delayed <input type="checkbox"/>			
		If yes, what was the likely ignition source	Hotwork <input type="checkbox"/> Spark electrical source <input type="checkbox"/> Spark metallic contact <input type="checkbox"/> Hot surface <input type="checkbox"/> Other <input type="checkbox"/>			
10.	Has the release been stopped and/or contained?	Yes or no	Yes			
Duration of the release <i>hh:mm:ss</i>		00:14:00				
Estimated rate of release <i>Litres or kg per hour</i>						
11.	Location of release	What or where is the location of the release?	Sea Water Coarse Filter A			
What equipment was involved in the release?		Sea Water Coarse Filter A, gearbox and drive motor.				
Is this functional location listed as safety-critical equipment?		No				
12.	Weather conditions	Ambient temperature °C	N/A			

**Part 1A – Information required within 3 days of an accident, dangerous occurrence or environmental incident**
**General information – all incidents**

	<i>Please complete as appropriate</i>	Relative humidity %				
		Wind speed m/s <i>NB: for enclosed areas use</i> Air change per hour				
		Wind direction e.g. from SW				
		Significant wave height m				
		Swell m				
		Current speed m/s				
		Current direction e.g. from SW				
13.	<i>If hydrocarbon fluid (liquid or gas) was released, please complete this section as well</i>	System of hydrocarbon release	Process <input type="checkbox"/> Drilling <input type="checkbox"/> Subsea / Pipeline <input type="checkbox"/>	Utilities <input type="checkbox"/> Well related <input type="checkbox"/> Marine <input type="checkbox"/>		
		Estimated inventory in the isolatable system <i>Litres or kg</i>	N/A			
		System pressure and size of piping or vessel <i>diameter (d in mm)</i> <i>length (l in m)</i> <i>or volume (V in L)</i>	Pressure MPag			
			Size Piping (d) and Piping (l) or Vessel (V)			
		Estimated equivalent hole diameter <i>d in mm</i>	N/A			

**Part 1B - Complete for accidents or dangerous occurrences**
**Accidents and dangerous occurrences information**

	Was NOPSEMA notified through the dedicated notification phone line? <i>Phone No. 1300 674 472</i>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
15.	<b>Action taken to make the work-site safe</b>	Was permission given by a NOPSEMA inspector to interfere with the site? OPGGS(S)R 2.49.	
		Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
		Action taken	<ul style="list-style-type: none"> <li>Area barricaded</li> <li>SWCF A isolated</li> <li>SWLP C is taken offline to reduce DP across SWCF's</li> </ul>
	Details of any disturbance of the work site	Area / sea water system made safe	



## Part 1B - Complete for accidents or dangerous occurrences

### Accidents and dangerous occurrences information

16.	Was an emergency response initiated?	Yes <input type="checkbox"/>		No <input checked="" type="checkbox"/>	
	Type of response	Manual <input type="checkbox"/> Automatic alarm <input type="checkbox"/>	Muster <input type="checkbox"/> Evacuation <input type="checkbox"/>		
	How effective was the emergency response?	N/A			
17.	Was anyone killed or injured? <i>Provide details below</i>		Yes <input type="checkbox"/>		No <input checked="" type="checkbox"/>
	Injured persons (IP)	Casualty No 1			
	<i>If different from item 2.</i>				
	Employer name	Employer address			
	Employer phone no.	Employer email			
	IP full name				
	IP date of birth	Sex		M <input type="checkbox"/>	F <input type="checkbox"/>
	IP residential address				
	IP phone no. (Work)	IP phone no. (Home) (Mobile)			
	IP occupation/job title	Contractor or core crew			
	Details of injury				
	<i>Based on TOOCS (refer last page)</i>				
	Nature of injury	a. Intracranial injury <input type="checkbox"/> b. Fractures <input type="checkbox"/> c. Wounds, lacerations, amputations, internal organ damage <input type="checkbox"/>	d. Burn <input type="checkbox"/> e. Nerve or spinal cord injury <input type="checkbox"/> f. Joint, ligament, muscle or tendon injury <input type="checkbox"/> g. Other <input type="checkbox"/>		
	Part of body	G1. Head or face <input type="checkbox"/> G2. Neck <input type="checkbox"/> G3. Trunk <input type="checkbox"/> G4. Shoulder or arm <input type="checkbox"/>	G5. Hip or leg <input type="checkbox"/> G6. Multiple locations <input type="checkbox"/> G7. Internal systems <input type="checkbox"/> G8. Other <input type="checkbox"/>		
	Mechanism of injury	G0. Falls, stepping, kneeling, sitting on object <input type="checkbox"/> G1. Hitting object <input type="checkbox"/> G2. Being hit or trapped <input type="checkbox"/>	G3. Exposure to sound or pressure <input type="checkbox"/> G4. Muscular stress <input type="checkbox"/> G5. Heat, cold or radiation <input type="checkbox"/> G6/7. Chemical, biological substance <input type="checkbox"/> G8. Other <input type="checkbox"/>		
Agency of injury	1. Machinery or fixed plant <input type="checkbox"/> 2. Mobile plant or transport <input type="checkbox"/> 3. Powered equipment <input type="checkbox"/> 4. Non-power equipment <input type="checkbox"/>	5/6. Chemicals, materials, substances <input type="checkbox"/> 7. Environmental agencies <input type="checkbox"/> 8. Human or animal agencies <input type="checkbox"/> 9. Other <input type="checkbox"/>			
Details of job being undertaken					
Day and hour of shift					

**Part 1B - Complete for accidents or dangerous occurrences**
**Accidents and dangerous occurrences information**

<i>NB: If more casualties, please copy/paste this section (19) for each additional casualty and insert here</i>				
18.	<b>Was there any serious damage?</b> <i>Provide details below</i>		Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	<b>Details</b>	<b>Item 1</b>	<b>Item 2</b>	<b>Item 3</b>
	Equipment damaged	SWCF A		
	Extent of damage	Drive motor sheared from gearbox		
19.	<b>Will the equipment be shut down?</b> <i>Yes or No</i>	Yes		
	If Yes, for how long?	TBC		
<i>NB: If more equipment seriously damaged, please copy/paste this section as required</i>				
20.	<b>Will the facility be shut down?</b>	<b>Yes or no</b> <i>If yes provide details below</i>	No	
	Facility shutdown	Date	dd/mm/yyyy	
		Time	24 hour clock	
		Duration	days / hours / minutes	
21.	<b>Immediate action taken/intended, if any, to prevent recurrence of incident.</b>	<b>Action</b>	<b>Responsible party</b>	<b>Completion date</b> <i>Actual or intended</i>
		SWCF A isolated SWLP C is taken offline to reduce DP across SWCF's	OTL	17 <sup>th</sup> May 2023
22.	<b>What were the immediate causes of the incident?</b>	TBC – investigation ongoing		

**Attachments**

<b>Are you attaching any documents?</b>			<b>Yes or no</b> <i>If yes provide details below</i>	No
<b>No.</b>	<b>ID</b>	<b>Revision</b>	<b>Date</b>	<b>Title/description</b>
<i>Insert or delete rows as required</i>				



**Part 1C – Complete for environmental incidents**
**Environmental Impacts**

23.	What is the current environment plan for this incident?	Environment plan				
24.	Has the incident resulted in an impact to the environment?	Yes or no <i>If yes provide details below</i>				
		Incident details <i>e.g. estimated area of impact, nature/significance of impact</i>				
		<b>ENVIRONMENTAL RECEPTORS</b>				
		Open ocean Shoreline Population centre Stakeholders Other sensitivity <i>e.g. conservation area, nesting beach</i>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Macroalgae Coral Reef Benthic invertebrates Seagrass Mangrove	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
		Further details				
	Details	Environment 1	Environment 2	Environment 3		
	Location of receiving environments <i>Lat/Long</i>					
	Date & time of impact					
	Action taken to minimise exposure					
	Specify each matter protected under Part 3 of the EPBC Act impacted					
<i>NB: If more environments were damaged, please copy/paste this section (Item E3) and add extra data</i>						
25.	Are any environments at risk? <i>Including as a result of spill response measures</i>	Yes or no <i>If yes, provide details</i>				
		Details <i>e.g. zone of potential impact</i>				
		<b>AT RISK ENVIRONMENTS</b>				
		Open ocean Shoreline Population Centre Stakeholders Other sensitivity <i>e.g. conservation area, nesting beach</i>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Macroalgae Coral Reef Benthic Invertebrates Seagrass Mangrove	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
	Details	Environment 1	Environment 2	Environment 3		
	Estimated location of 'at-risk' environments					
	Estimated impact date & time					

**Part 1C – Complete for environmental incidents**
**Environmental Impacts**

	Action required to minimise exposure			
	Specify each matter protected under Part 3 of the EPBC Act at risk			
<i>NB: If more environments at risk of damage, please copy/paste this section (Item E2) and add extra data</i>				
26.	Was an oil pollution emergency plan activated?	Yes or no		
		If yes, what action has been implemented /planned?		
		If yes, how effective is/was the spill response?		
27.	Was an environmental monitoring program initiated?	Yes or no		
		If yes, what actions have been implemented and/or planned?		
28.	Did the incident result in the death or injury of any fauna?	Yes or no (If yes provide details of species in the table below)		
	Injured fauna	Species 1	Species 2	Species 3
	Species name (common or scientific name)			
	Number of individuals killed or injured	Killed: Injured:	Killed: Injured:	Killed: Injured:
<i>NB: If more species were injured or killed, please copy/paste this section (Item E4) and add extra data</i>				
29.	Actions taken to avoid or mitigate any adverse environmental impacts of the incident.	Action	Responsible party	Completion date <i>Actual or intended</i>
<i>NB: If more actions, please add extra rows as required</i>				
30.	Corrective actions taken, or proposed, to stop, control or remedy the incident.	Action	Responsible party	Completion date <i>Actual or intended</i>
<i>NB: If more actions, please add extra rows as required</i>				
31.		Action	Responsible party	Completion date <i>Actual or intended</i>



## Part 1C – Complete for environmental incidents

### Environmental Impacts

Actions taken, or proposed, to prevent a similar incident occurring in the future.			
<i>NB: If more actions, please add extra rows as required</i>			

### Attachments

Are you attaching any documents?			Yes or no <i>If yes provide details below</i>	
No.	ID	Revision	Date	Title/Description
<i>Insert or delete rows as required</i>				

**Part 2 – Information required within 30 days of accident or dangerous occurrence**

NOPSEMA acknowledges that in many circumstances an operator may not have completed an investigation within 3 days of an accident or first detection of a dangerous occurrence and agrees that these items must be provided within 30 days unless otherwise agreed, in writing with NOPSEMA. In circumstances where an investigation has been completed within 3 days, and these items are available (supplemented, as required by any attachments) this part should also be completed at that time.

	<b>Has the investigation been completed?</b>	Yes or no	Yes
	<b>Root cause analysis</b> <i>What were the root causes?</i>	Root cause 1	Described in text below.
		Root cause 2	
		Root cause 3	
		Other root causes	
32.	<b>Full report</b> <i>Describe investigation in detail, including who conducted the investigation and in accordance with what standard/procedure with reference to attachments listed in the 'attachments table' (following) as applicable</i>	<p>A TapRooT investigation was conducted in accordance with the INPEX Incident Reporting &amp; Investigation Procedure. The investigation team comprised of an [REDACTED]</p> <p>In preparation for four planned SWCF internal filter element and backwash arm replacements, it was identified that the associated gearbox and motor should be overhauled to ensure the system was fully operational once returned to service.</p> <p>A Risk Assessment (RA022006) was submitted and approved at the Permit Application Meeting (PAM) for the SWCF 'A' package on the 03.05.2023. After the initial toolbox talk, permit (PE013255) was signed on at the work location on the 17.05.2023. The Work Party (WP) noticed that the SWCF 'B' package had already been worked on, with the bolts physically removed.</p> <p>One of the WP returned to the workshop to obtain additional tooling whilst the Involved Person (IP) remained at the site to remove the four gearbox retaining bolts. The IP removed three of the bolts fully and was in the process of removing the fourth when the gearbox and motor assembly along with the drive shaft ejected from the SWCF 'A' package, which remained online and had 1000kPa of pressure inside, narrowly missing the IP.</p> <p>The IP removed themselves from the vicinity, and returned to the workshop where the situation was escalated to the Area Authority. The package was then isolated, de-pressurised and preserved for the investigation team.</p> <p>Initial findings highlighted that the during the work scope isolation planning phase, the work was identified as a non-intrusive activity and continued to be assessed as such through to approval and permit issuance.</p> <p><b>Findings</b></p> <p>The investigation identified a number of Causal Factors &amp; Root Causes for this incident, summarised below.</p>	

**Part 2 – Information required within 30 days of accident or dangerous occurrence**

NOPSEMA acknowledges that in many circumstances an operator may not have completed an investigation within 3 days of an accident or first detection of a dangerous occurrence and agrees that these items must be provided within 30 days unless otherwise agreed, in writing with NOPSEMA. In circumstances where an investigation has been completed within 3 days, and these items are available (supplemented, as required by any attachments) this part should also be completed at that time.

		<p><b>Root Cause</b> - The SWCF Package was not process isolated to segregate the source of energy from the workers.</p> <p><b>Causal Factor 1</b> - Design issues with filter elements resulting in galvanic corrosion due to material selection.</p> <p><b>Causal Factor 2</b> - The Biofouling Package stopped working, resulting in manual shock dosing of hypochlorite that wasn't calibrated, which accelerated the corrosion of the internals of the SWCF.</p> <p><b>Causal Factor 3</b> - The MOC raised to permit seawater vessel operations without coarse filtration internals didn't identify the need to update the general arrangement drawings once the backwash arm and straining element internals were removed. The MOC also didn't incorporate Mech Static TA review. The MOC did not state which vessels had had the internals removed.</p> <p><b>Causal Factor 4</b> - No MOC raised to remove the vessel internals once they were found to be in a corroded state.</p> <p><b>Causal Factor 5</b> - Modifying the vessel whilst still in service by removing the gearbox without an MOC approval to change the vessel configuration.</p> <p><b>Causal Factor 6</b> - Lack of visibility on equipment status relating to temporary MOCs. No visual linkage between temporary MOCs to execution SAP work orders or FLOC's.</p>		
33.	Actions to prevent recurrence of same or similar incident	<b>Action</b>	<b>Responsible party</b>	<b>Completion date</b> <i>Actual or intended</i>
		Refer to attached table.		
<i>NB: Add or delete rows as appropriate</i>				

**Attachments (Insert/delete rows as required)**

Are you attaching any documents?			Yes or no <i>If yes provide details below</i>	Yes
No.	ID	Revision	Date	Title/description
				CPF SWCF "A" Action Table

- **Instructions and general guidance for use:**

1. The use of this form is voluntary and is provided to assist operators and titleholders to comply with their obligations to give notice and provide reports of incidents to NOPSEMA under the applicable legislation.
2. Accidents, dangerous occurrences or environmental incidents can all be reported using this same form.
3. The applicable legislation for incident reporting is:
  - a. Offshore Petroleum and Greenhouse Gas Storage (Safety) Regulations 2009 [OPGGS(S)R]; and
  - b. Offshore Petroleum and Greenhouse Gas Storage (Environment) Regulations 2009 [OPGGS(E)R], for facilities located in Commonwealth waters; or
  - c. for facilities located in designated coastal waters, the relevant State or Territory Act and associated Regulations where there is a current conferral of powers to NOPSEMA.
4. In the context of this form an incident is a reportable incident as defined under:
  - a. OPGGSA, Schedule 3, Clause 82.
  - b. OPGGS(E)R, regulation 4.
5. This form should be used in conjunction with NOPSEMA Guidance Notes available on the NOPSEMA website:
  - a. N-03000-GN0099 Notification and Reporting of Accidents and Dangerous Occurrences
  - b. N-03000-GN0926 Notification and Reporting of Environmental Incidents
6. Part 1 requires completion for all incidents; then ALSO complete part 2 if the incident is an accident or dangerous occurrence.
7. NOPSEMA considers that a full report will contain copies of documentary material referenced and/or relied on in the course of completing this form, which may include (but not be limited to) as appropriate: witness statements, management system documents, drawings, diagrams and photographs, third party reports (audit, inspection, material analysis etc.), internal records and correspondence.
8. This form is intended to be completed electronically using Microsoft Word by completing the unshaded cells which will expand as required to accept the information required and the check boxes where relevant (NB: check boxes may appear shaded and have reduced functionality in MS Word versions prior to 2010).
9. The completed version of this form (and any attachments, where applicable) should be emailed to:  
[submissions@nopsema.gov.au](mailto:submissions@nopsema.gov.au)  
or submitted via secure file transfer at: <https://securefile.nopsema.gov.au/filedrop/submissions> as soon as practicable, but in any case within three days of the incident.

## • References

NOPSEMA website: [www.nopsema.gov.au](http://www.nopsema.gov.au)

TOOCS – Type of Occurrence Classification System.

The *Type of Occurrence Classifications System, Version 3.0* (TOOCS3.0) was developed to improve the quality and consistency of data. This system aligns with the International Classification of Diseases –Australian Modification (ICD10-AM).

[http://www.safeworkaustralia.gov.au/sites/SWA/AboutSafeWorkAustralia/WhatWeDo/Publications/Documents/207/TypeOfOccurrenceClassificationSystem\(TOOCs\)3rdEditionRevision1.pdf](http://www.safeworkaustralia.gov.au/sites/SWA/AboutSafeWorkAustralia/WhatWeDo/Publications/Documents/207/TypeOfOccurrenceClassificationSystem(TOOCs)3rdEditionRevision1.pdf)

OPGGS(S)R. Offshore Petroleum and Greenhouse Gas Storage (Safety) Regulations 2009. Select Legislative Instrument 2009 No. 382 as amended and made under the *Offshore Petroleum and Greenhouse Gas Storage Act 2006*. Commonwealth of Australia.

OPGGS(E)R. Offshore Petroleum and Greenhouse Gas Storage (Environment) Regulations 2009. Statutory Rules 1999 No. 228 as amended and made under the *Offshore Petroleum and Greenhouse Gas Storage Act 2006*. Commonwealth of Australia.

## • Privacy Notice

NOPSEMA collects your personal information for the purpose of investigating accidents, dangerous occurrences and environmental incidents under the Offshore Petroleum and Greenhouse Gas Storage Act 2006.

NOPSEMA will not use or disclose your personal information for any other purpose without your consent, unless it is required or authorised by law, or relates to NOPSEMA's enforcement activities. Your personal information may be disclosed to the following organisations, entities or individuals:

- individuals who make a request under the *Freedom of Information Act 1982*
- the Australian National Audit Office and other privately-appointed auditors
- other law enforcement bodies (for example, the police or the Coroner)
- NOPSEMA's legal advisors.

NOPSEMA may occasionally be required to disclose information to overseas recipients in order to discharge its functions or exercise its powers, or to perform its necessary business activities.

Information about how you can access, or seek correction to, your personal information is contained in NOPSEMA's APP Privacy Policy at [www.nopsema.gov.au/privacy](http://www.nopsema.gov.au/privacy). If you have an enquiry or a complaint about your privacy, please contact NOPSEMA's Privacy Contact Officer on (08) 6188 8700 or by email at: [privacy@nopsema.gov.au](mailto:privacy@nopsema.gov.au).