

Safety Hazard Report

Use this form to record hazards found during workplace inspections and submit copies to the department head responsible and the JOHSC.

Person completing the form: _____ Date: _____

Rating	Location and description of hazard		
Recommended action			
Person responsible for corrective actions:			Target date:
			Completed:
Rating	Location and description of hazard		
Recommended action			
Person responsible for corrective actions			Target date:
			Completed:
Rating	Location and description of hazard		
Recommended action			
Person responsible for corrective actions			Target date:
			Completed:

Rate all Hazards as below:

A – Urgent hazard - Immediate danger of loss of life, body parts and/or extensive loss of structure, equipment, or material. Immediate corrective action is required; activity should be discontinued until the hazard is corrected.

B – Significant hazard - Danger of a serious injury, illness or property damage. Temporary measures are acceptable but must be corrected as soon as possible.

C – Minor hazard - Danger of a non-disabling injury or non-disruptive property damage. Should be corrected without undue delay.