

### HAZARD REPORT FORM

**A =** IMMINENT DANGER WHICH REQUIRES IMMEDIATE CORRECTIVE ACTION

**B =** HAZARDOUS CONDITION OR ACTIVITY WHICH IS NOT IMMINENTLY DANGEROUS BUT SHOULD BE ATTENDED TO AS SOON AS POSSIBLE

**C =** LOW HAZARD. GENERALLY DOES NOT INCLUDE MACHINERY WITH MOVING PARTS

PRODUCTION/COMPANY: \_\_\_\_\_

DATE: \_\_\_\_\_

HAZARD CLASSIFICATION: A  B  C

DESCRIPTION OF HAZARD:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

LOCATION (be specific as possible):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ACTION NEEDED (please note if intermediate steps were taken to alleviate the hazard):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

OTHER COMMENTS (continue on back if necessary):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CORRECTIVE ACTION (describe who will correct the situation, what will be done & when):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature, Safety Representative

\_\_\_\_\_  
Date

**BE SURE TO SUBMIT THIS FORM TO  
YOUR IMMEDIATE SUPERVISOR &  
THE PRODUCTION OFFICE**

HAZARD CORRECTED Y\_\_\_ N\_\_\_  
SIGNED: \_\_\_\_\_  
DATE: \_\_\_\_\_