

# HAZARD REPORT FORM

A = IMMINENT DANGER WHICH REQUIRES IMMEDIATE CORRECTIVE ACTION  
B = HAZARDOUS CONDITION OR ACTIVITY WHICH IS NOT IMMEDIATELY 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: \_\_\_\_\_