

HAZARD REPORT FORM - SAMPLE

ANY PERSON CAN FILL IN THIS FORM AND HAND IT TO THE STORE MANAGER.

I have identified a hazard in the workplace:

Say what it is:	
Say where it happened:	
Sign your name and today's date:	

Thank you for helping to make this a safer workplace.

Now give this form to the Store Manager



CORRECTIVE ACTION REPORT - SAMPLE

PROBLEM ANALYSIS: Will this happen again if nothing is done? (Completed by Manager/Owner).

Action taken to prevent future problems or remove the identified hazard; explain what has been done:
Sign your name and today's date:
PROBLEM ANALYSIS & CLOSEOUT: (Completed by Manager/Owner).
Verification of actions having been effective:
What has changed (docs, training, system) as a result of this action?:
Will this prevent a recurrence?
Is further follow up required? Yes/No
If yes, what follow up is required?Sign your name and today's date:

Discuss with employees and file a copy in the WHS Appendix under Hazard Management.